| Fill in this information to identify your case: |  |                                    |
|---|--|------------------------------------|
| United States Bankruptcy Court for the :        |  |                                    |
| NORTHERN District ofILLINOIS(State)             |  |                                    |
| Case Number (If known):                         | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

## Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa     | Identify Yourself  |                            |   |
|--------|--|----------------------------|---|
|        |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.     | Your full name   |                            |   |
|        | Write the name that is on your government-issued picture identification (for example, your driver's license or | Angelina First name        | First name                                    |
|        | passport).   | Middle name                | Middle name                                   |
|        | Bring your picture   | Baltazar                   |   |
|        | identification to your meeting with the trustee.   | Last name                  | Last name                                     |
|        |  | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2.     | All other names you  |                            |   |
|        | have used in the last 8 years  | First name                 | First name                                    |
|        | Include your married or maiden names.  | Middle name                | Middle name                                   |
|        |  | Last name                  | Last name                                     |
|        |  | First name                 | First name                                    |
|        |  | Middle name                | Middle name                                   |
|        |  | Last name                  | Last name                                     |
| 3.     | Only the last 4 digits of your Social Security   | XXX - XX - <u>1414</u>     | XXX - XX                                      |
| Indivi | number or federal<br>Individual Taxpayer<br>Identification number  | OR                         | OR  |
|        |  | 9xx - xx                   | 9xx - xx                                      |

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Case Number (if known)

|  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |
|--|---|---|--|--|
| Any business names<br>and Employer<br>Identification Numbers<br>(EIN) you have used in | I have not used any business names or EINs.   | I have not used any business names or EINs.   |  |  |
| the last 8 years   | Business name   | Business name   |  |  |
| Include trade names and doing business as names  | Business name   | Business name   |  |  |
|  | EIN   | EIN   |  |  |
|  | EIN   | EIN   |  |  |
| Where you live   |   | If Debtor 2 lives at a different address:   |  |  |
|  | 1532 Home Ave.  Number Street   | Number Street   |  |  |
|  | Berwyn         IL         60402           City         State         ZIP Code   | City State ZIP Code   |  |  |
|  | COOK  | County  |  |  |
|  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |  |  |
|  | P.O Box 2364  Number Street   | P.O Box 2364 Number Street  |  |  |
|  |   |   |  |  |
|  | P.O. Box  | P.O. Box  |  |  |
|  | Northbrook IL 60065 City State ZIP Code   | Northbrook IL 60065 City State ZIP Code   |  |  |
| Why you are choosing   | Check one:  | Check one:  |  |  |
| this district to file for bankruptcy.  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                            |  |  |
|  | have another reason. Explain. (See 28 U.S.C. § 1408   | I have another reason. Explain.<br>(See 28 U.S.C. § 1408  |  |  |
|  |   |   |  |  |
|  |   |   |  |  |
|  |   |   |  |  |

Angelina

Debtor 1

| Debto | or 1  | Case 16-2594.  Angelina First Name                     | 3 Doc 1                                 | Filed 08/12/16<br>Document<br>Baltazar                 | Entered 08/12/16 13:01:44 Page 3 of 55 Case Number (if known)  | Desc Main           |  |  |
|-------|-------|--|---|--|--|---------------------|--|--|
| Pa    | rt 2: | Tell the Court About You                               | r Bankruptcy Case                       |  |  |                     |  |  |
| Baı   |       | chapter of the<br>kruptcy Code you<br>choosing to file | ,                                       | ruptcy (Form 2010)). Also, g                           | s, see Notice Required by 11 U.S.C. § 342(b) for I to the top of page 1 and check the appropriate to   |                     |  |  |
|       |       | ler  | ☐ Chapter 1                             |  |  |                     |  |  |
|       |       |  | ☐ Chapter 12                            |  |  |                     |  |  |
|       |       |  | ☐ Chapter 1                             | 3  |  |                     |  |  |
| 8.    | Hov   | v you will pay the fee                                 | local cour<br>yourself, y<br>submitting | t for more details about l<br>you may pay with cash, o | e my petition. Please check with the clerk's on mow you may pay. Typically, if you are payin cashier's check, or money order. If your attorney may pay with a credit content of the conten | g the fee<br>mey is |  |  |
|       |       |  |   |  | nts. If you choose this option, sign and attact<br>The Filing Fee in Installments (Official Form   |                     |  |  |
|       |       |  | I request                               | that mv fee be waived (Y                               | ou may request this option only if you are fil   | ing for Chapter 7.  |  |  |

By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

Have you filed for bankruptcy within the last 8 years?

| ☐ Yes. | District None | When | When Case Number |  |
|--------|---------------|------|------------------|--|
|        | District None | When | Case Number      |  |

District \_\_\_\_\_\_ When \_\_\_\_\_ Case Number \_\_\_\_\_\_

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate?

| No |
|----|
|    |

No

 ☐ Yes.
 Debtor \_\_\_\_\_\_\_ Relationship to you \_\_\_\_\_\_\_

 District \_\_\_\_\_\_ When \_\_\_\_\_\_ Case Number, if known \_\_\_\_\_\_\_

 MM / DD / YYYY

District \_\_\_\_\_ Relationship to you \_\_\_\_\_\_

Case Number, if known \_\_\_\_\_

MM / DD / YYYY

11. Do you rent your residence?

No. Go to line 12

☐ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

☐ No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

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Angelina Document Baltazar

Debtor 1

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Case Number (if known)

| First Name   | Middle Name                      | Last Name  |  |  |   |                         |   |
|--|----------------------------------|--|--|--|---|-------------------------|---|
| t 3: Report About Any Bus  | sinesses You Ow                  | n as a Sole Proprietor   |  |  |   |                         |   |
| Are you a sole proprietor of any full- or part-time business?  | ■ No.<br>□ Yes.                  | Go to Part 4. Name and location of b   | ousiness   |  |   |                         |   |
| A sole proprietorship is a<br>business you operate as an<br>individual, and is not a<br>separate legal entity such as  |                                  | Name of business, if any   |  |  |   |                         |   |
| a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it to this petition.                                   |                                  | Number Street  |  |  |   |                         |   |
|  |                                  | City   |  |  |   | State                   | Zip Code  |
|  |                                  | Check the appropriate  | box to describe  | your business:   |   |                         |   |
|  |                                  | ☐ Health Care Busi   | •  | •  | . ,,  |                         |   |
|  |                                  | ☐ Single Asset Rea ☐ Stockbroker (as o   |  | _  | 101(51B))   |                         |   |
|  |                                  | ☐ Commodity Broke  |  |  | )   |                         |   |
|  |                                  | ☐ None of the abov   | 'e   |  |   |                         |   |
| Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).           | appropria balance s documen  No. | in filing under Chapter 11, the deadlines. If you indicated, statement of operates do not exist, follow the I am not filing under Chapter the Bankruptcy Code.  I am filing under Chapter Bankruptcy Code. | ate that you are tions, cash-flow procedure in 11 pter 11. 11, but I am NO | a small business de<br>statement, and fede<br>U.S.C. § 1116(1)(E | ebtor, you must<br>eral income tax<br>3).<br>debtor accordi | t attach your return or | our most recent<br>r if any of these<br>definition in |
| Report if You Own or   | Have Any Hazard                  | lous Property or Any Prop  | erty That Needs  | Immediate Attentio   | n   |                         |   |
| Do you own or have any<br>property that poses or is<br>alleged to pose a threat<br>of imminent and<br>indentifiable hazard to  | No.                              | What is the hazard?  |  |  |   |                         |   |
| public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building |                                  | If immediate attention is  | needed, why is   | it needed?   |   |                         |   |
| that needs urgent repairs?   |                                  | Where is the property?   |  |  |   |                         |   |
|  |                                  | and property:  | Number   | Street   |   |                         |   |
|  |                                  |  | City   |  |   |                         | e ZIP Code  |
|  |                                  |  | J.,,   |  |   | Cidio                   |   |

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Debtor 1

Angelina

Name Middle N

Last Name

Case Number (if known) \_

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| circ a Bricinig About Groun Goursening  |   |
|---|---|
| About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
| You must check one:   | You must check one:   |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  | ☐I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.   |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   | ☐I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.  |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of:   | I am not required to receive a briefing about credit counseling because of:   |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  |
| Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.  | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.  |
| Active duty. I am currently on active military duty in a military combat zone.  | Active duty. I am currently on active military duty in a military combat zone.  |
| If you believe you are not required to receive a briefing about credit counseling, you must file a  | If you believe you are not required to receive a briefing about credit counseling, you must file a  |

motion for waiver of credit counseling with the court.

motion for waiver of credit counseling with the court.

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Debtor 1

Angelina

rst Name

Middle Name

Loot Nom

Case Number (if known)

| Pa  | rt 6: Answer These Questions  | s for Reporting Purposes  |   |   |  |  |  |
|-----|---|---|---|---|--|--|--|
| 16. | What kind of debts do you have?   | <ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."</li> <li>No. Go to line 16b.</li> <li>Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain proper for a husiness as investment or through the expection of the husiness or investment.</li> </ul> |   |   |  |  |  |
|     |   | money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.  |   |   |  |  |  |
|     |   | _   | you owe that are not consumer debts or busi   | ness debts.   |  |  |  |
| 17. | Are you filing under<br>Chapter 7?  |   | der Chapter 7. Go to line 18. Chapter 7. Do you estimate that after any exe                               | omnt property is evaluded and   |  |  |  |
|     | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? |   | penses are paid that funds will be available to   |   |  |  |  |
| 18. | How many creditors do you estimate that you owe?  | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999   | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000  | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000  |  |  |  |
| 19. | How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |  |  |  |
| 20. | How much do you<br>estimate your liabilities<br>to be?  | □ \$0-\$50,000<br>■ \$50,001-\$100,000<br>□ \$100,001-\$500,000<br>□ \$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |  |  |  |
| Pa  | rt 7: Sign Below  |   |   |   |  |  |  |
| For | you   | correct.  If I have chosen to file under  | , and I declare under penalty of perjury that the Chapter 7, I am aware that I may proceed, if            | eligible, under Chapter 7, 11,12, or 13   |  |  |  |
|     |   | under Chapter 7.  If no attorney represents me  | and I did not pay or agree to pay someone w   | ho is not an attorney to help me fill out   |  |  |  |
|     |   |   | ed and read the notice required by 11 U.S.C. e with the chapter of title 11, United States Co             |   |  |  |  |
|     |   | I understand making a false s   | statement, concealing property, or obtaining result in fines up to \$250,000, or imprisonmen              | money or property by fraud in connection  |  |  |  |
|     |   | /s/ Angelina Balta Signature of Debtor 1  |   | Signature of Debtor 2   |  |  |  |
|     |   | Executed on08/10/   | 2016<br>DD / YYYY   | Executed onMM / DD / YYYY   |  |  |  |

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Debtor 1 Angelina Baltazar Case Number (if known) \_\_\_\_\_\_

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Christine Michelle Kuhlman | Date        | Date: 08/11/2016  MM / DD / YYYY |           |  |
|----------------------------------|-------------|----------------------------------|-----------|--|
| Signature of Attorney for Debtor | Buto        |                                  |           |  |
| Christine Michelle Kuhlman       |             |                                  |           |  |
| Printed name                     |             |                                  |           |  |
| Geraci Law L.L.C.                |             |                                  |           |  |
| Firm name                        |             |                                  |           |  |
| 55 E. Monroe St., #3400          |             |                                  |           |  |
| Number Street                    |             |                                  |           |  |
| Number Street                    | IL          | 60603                            | 3         |  |
|                                  | IL<br>State |                                  | 3<br>Code |  |
| Number Street Chicago            | State       | ZIP                              | ·         |  |
| Number Street  Chicago  City     | State       | ZIP                              | Code      |  |

| Fill in this information to identify your case: |                     |                                       |                      |  |  |
|---|---------------------|---------------------------------------|----------------------|--|--|
| Debtor 1  | Angelina            |                                       | Baltazar             |  |  |
|   | First Name          | Middle Name                           | Last Name            |  |  |
| Debtor 2  |                     |                                       |                      |  |  |
| (Spouse, if filing)                             | First Name          | Middle Name                           | Last Name            |  |  |
| United States                                   | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | ILLINOIS_<br>(State) |  |  |
| Case Number<br>(If known)                       | r                   |                                       | _                    |  |  |
|   |                     |                                       |                      |  |  |

## Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: | Summarize Your Assets  |  |
|---------|--|--|
|         |  | <b>Your assets</b> Value of what you own |
|         | ule A/B: Property (Official Form 106A/B) by line 55, Total real estate, from Schedule A/B  | <u> </u>                                 |
| 1b. Cop | by line 62, Total personal property, from Schedule A/B   | \$ 21,928                                |
| 1c. Cop | by line 63, Total of all property on <i>Schedule A/B</i>   | \$ 21,928                                |
| Part 2: | Summarize Your Liabilities   |  |
|         |  | Your liabilities<br>Amount you owe       |
|         | ole D: Creditors Who Have Claims Secured by Property (Official Form 106D) by the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$32,491                                 |
|         | tle E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) by the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$0                                      |
| 3b. Cop | by the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$25,947                                 |
|         |  |  |
| Part 3: | Summarize Your Liabilities   |  |
|         | ole I: Your Income (Official Form 106I) your combined monthly income from line 12 of Schedule I  | \$1,200.00                               |
|         | tle J: Your Expenses (Official Form 106J) your monthly expenses from line 22c of Schedule J  | \$1,199.00                               |

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Document Baltazar Page 9 of 55 Angelina Case Number (if known) \_ First Name Middle Name Last Name **EntriesDescription LiabilitiesAmount** <u>AssetsAmount</u> **Answer These Questions for Administrative and Statistical Records** 

| 1  | 11(4)  |             |  |  |  |  |
|----|--|-------------|--|--|--|--|
| 6. | Are you filing for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes  |             |  |  |  |  |
| 7. | What kind of debt do you have?  Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual prifamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.  Your debts are not primarily consumer debts. You have nothing to report on this part of the form. On this form to the court with your other schedules. | C. § 159.   |  |  |  |  |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from O Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.  | \$ 1,183.67 |  |  |  |  |
| 9. | Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :  From Part 4 of Schedule E/F, copy the following:   | Total claim |  |  |  |  |
|    | 9a. Domestic support obligations (Copy line 6a.)   | \$ 0.00     |  |  |  |  |
|    | <ul><li>9b. Taxes and certain other debts you owe the government. (Copy line 6b.)</li><li>9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)</li></ul>  |             |  |  |  |  |
|    | 9d. Student loans. (Copy line 6f.)   | \$_0.00     |  |  |  |  |
|    | 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)   | \$_0.00     |  |  |  |  |
|    | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | \$_0.00     |  |  |  |  |

\$ 0.00

9g. Total. Add lines 9a through 9f.

|  | Caso 16  | 3 250/2 Doc 1   | Eilad 09/12/16  | Entered 08/12/16 13  | 3·01·44 Des                                  | sc Main  |
|--|--|---|---|--|--|--|
| Fill in this in  | formation to ide   | ntify your case and this fili   | ng:   | 0 of 55  | 0.01.44 BC                                   | 30 IVICIII   |
| Debtor 1   | Angelina   |   | Baltazar  |  |  |  |
|  | First Name   | Middle Name   | Last Name   |  |  |  |
| Debtor 2<br>(Spouse, if filing)  | First Name   | Middle Name   | Last Name   |  |  |  |
| United States  | Bankruptcy Court fo  | or the : <u>NORTHERN</u> Distric  | ct of _ <u>ILLINOIS</u> _   |  |  |  |
| Case Number  |  |   | (State)   |  | [  | Check if this is an  |
| (If known)   |  |   |   |  |  | amended filing   |
| Official Fo  | <u>orm 106A</u>  | <u>/B</u>   |   |  |  |  |
| Schedul  | e A/B: Pr  | operty  |   |  |  | 12/15  |
| ategory where esponsible for ages, write you on the second of the second | you think it fits supplying correur name and cas Describe Each Reven or have any le  | best. Be as complete and a<br>ct information. If more spa<br>e number (if known). Answ<br>sidence, Building, Land, or O<br>gal or equitable interest in | accurate as possible. If two m<br>ce is needed, attach a separa   | , or similar property?   | both are equally                             |  |
|  |  | •   |   |  | >  | \$0.00   |
| Part 2:  | Describe Your Vel  | nicles  |   |  |  |  |
| O3. Cars, vans  No. Yes.  No.  Value of the control | Describe  Describe  Make:  Model:  M | Toyota Rav4 2015 13,000  homes, ATVs and other recors, personal watercraft, fishing   | Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors  Check if this is communinstructions)  Creational vehicles, other veh vessels, snowmobiles, motorcycle | y s and another unity property (see icles, and accessories accessories | Do not deduct secured the amount of any secu | claims or exemptions. Put red claims on Schedule D: aims Secured by Property  Current value of the portion you own?  21,225.00 |
|  |  |   | our entries fro Part 2, includir  |  |  | \$ 21,225.00   |
| you have at  | tached for Part 2  | z. Write that number here .   |   | >  |  |  |
| Part 3:  | Describe Your Per  | sonal and Household Items   |   |  |  |  |
| Do you own or  | r have any legal (   | or equitable interest in any  | of the following items?   |  |  | Current value of the portion you own? Do not deduct secured claims or exemptions   |
| Examples:  |  | ilshings<br>urniture, linens, china, kitchenwa  | are   |  |  |  |
| Yes.   | Describe   | Furniture, linens, small applian  | nces, table & chairs, bedroom set   |  | \$500  | \$ 500.00  |

Official Form 106A/B Record # 708074 Schedule A/B: Property Page 1 of 6

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| 07.   | Electronics   | •                     |  |       |        |              |           |        |
|-------|---|-----------------------|--|-------|--------|--------------|-----------|--------|
|       |   |                       | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music  |       |        |              |           |        |
|       |   | electronic devices    | including cell phones, cameras, media players, games   |       |        |              |           |        |
|       | No.   |                       |  |       |        |              |           |        |
|       | Yes.  | Describe              |  |       |        |              |           |        |
|       |   |                       | Flat screen TV, computer, printer, music collection, cell phone  | \$100 |        | •            | 1         | 00.00  |
| 00    | Callagtible   | a of value            |  |       |        | \$           |           | 00.00  |
| UO.   | 08. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; |                       |  |       |        |              |           |        |
|       |   |                       | collections; other collections, memorabilia, collectibles  |       |        |              |           |        |
|       | No.   | ,                     |  |       |        |              |           |        |
|       | Yes.  | Describe              |  |       |        |              |           |        |
|       | 103.  | Describe              |  |       |        | \$           |           | 0.00   |
| 09.   | Equipment   | for sports and        | hobbies  |       |        | Ψ            |           |        |
|       |   | -                     | hic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes  |       |        |              |           |        |
|       | and kayaks  | carpentry tools; r    | nusical instruments  |       |        |              |           |        |
|       | No.   |                       |  |       |        |              |           |        |
|       | Yes.  | Describe              |  |       |        |              |           |        |
|       | _   |                       |  |       |        | \$           |           | 0.00   |
| 10.   | Firearms  |                       |  |       |        |              |           |        |
|       | Examples: I   | Pistols, rifles, shot | guns, ammunition, and related equipment  |       |        |              |           |        |
|       | No.   |                       |  |       |        |              |           |        |
|       | Yes.  | Describe              |  |       |        |              |           |        |
|       | _   |                       |  |       |        | \$           |           | 0.00   |
| 11.   | Clothes   |                       |  |       |        |              |           |        |
|       | Examples: I   | Everyday clothes,     | furs, leather coats, designer wear, shoes, accessories   |       |        |              |           |        |
|       | No.   |                       |  |       |        |              |           |        |
|       | Yes.  | Describe              |  |       |        |              |           |        |
|       |   |                       | Everyday clothes, shoes, accessories   | \$100 |        |              |           |        |
|       |   |                       |  |       |        | \$           | 1         | 00.00  |
| 12.   | Jewelry   |                       |  |       |        |              |           |        |
|       |   | Everyday jewelry,     | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,   |       |        |              |           |        |
|       | gold, silver  |                       |  |       |        |              |           |        |
|       | No.   |                       |  |       |        |              |           |        |
|       | Yes.  | Describe              |  |       |        |              |           |        |
|       |   |                       |  |       |        | \$           |           | 0.00   |
| 13.   | Non-farm a  |                       |  |       |        |              |           |        |
|       |   | Dogs, cats, birds, I  | horses   |       |        |              |           |        |
|       | No.   |                       |  |       | ,      |              |           |        |
|       | Yes.  | Describe              |  |       |        |              |           |        |
| l     |   |                       |  |       |        | \$           |           | 0.00   |
| 14.   |   | personal and ho       | ousehold items you did not already list, including any health aids you did not list  |       |        |              |           |        |
|       | No.   |                       |  |       |        |              |           |        |
|       | Yes.  | Describe              |  |       |        |              |           |        |
|       |   |                       |  |       |        | \$           |           | 0.00   |
| 15. 4 | Add the do  | lar value of all      | of your entries from Part 3, including any entries for pages you have attached   |       | Γ      |              | \$        | 700.00 |
| f     | or Part 3. \  | Write that numb       | per here>  |       | L      |              | Ψ         | 700.00 |
|       |   |                       |  |       |        |              |           |        |
| Pa    | art 4:  | escribe Your Fir      | nancial Assets   |       |        |              |           |        |
|       |   |                       |  |       |        |              |           |        |
| Do    | you own or  | have any legal        | or equitable interest in any of the following?   |       |        | nt value     |           |        |
|       |   |                       |  |       | •      | n you ow     |           |        |
|       |   |                       |  |       |        | deduct sed   | cured cia | aims   |
| 16    | Cash  |                       |  |       | OI CAE |              |           |        |
| 16.   |   | Money you have in     | a your wallet in your home, in a cafe denocit how, and on hand when you file your netition   |       |        |              |           |        |
|       | No.   | TOTICY YOU HAVE II    | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition  |       |        |              |           |        |
|       | =   | D                     |  |       |        |              |           |        |
|       | Yes.  | Describe              |  |       |        | _            |           | 0.00   |
| 47    | Danasita -  | f manay               |  |       |        | \$           |           | 0.00   |
| 17.   | Deposits of   | =                     | or other financial accounts; partificates of deposits shares in gradit unions, brokerses haves   |       |        |              |           |        |
|       |   |                       | , or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, If you have multiple accounts with the same institution, list each.   |       |        |              |           |        |
|       | No.   |                       | y  |       |        |              |           |        |
|       | Yes.  | Describe              | Account Type: Institution name:  |       |        |              |           |        |
|       | 163.  | בפטנווטפ              | Other financial account  Chase Bank Liquid Card  |       |        | ¢            |           | 3.00   |
|       |   |                       | The second service ser |       |        | * <u>-</u> - |           | 3.00   |
| 1     |   |                       |  |       |        | <b>\$</b> _  |           | 3.00   |

Debtor 1

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| 18.         | Bonds, mu    | tual funds, or p    | ublicly traded stocks  |                              |
|-------------|--------------|---------------------|--|------------------------------|
|             | Examples: I  | Bond funds, invest  | ment accounts with brokerage firms, money market accounts  |                              |
|             | No.          |                     |  |                              |
|             | Yes.         | Describe            | Institution or issuer name:  |                              |
|             |              |                     |  | \$0 <u>.0</u> 0              |
| 19.         |              | ly traded stock     | and interests in incorporated and unincorporated businesses, including an interest in  |                              |
|             | No.          |                     | N (5 % 18 4 60 1)  |                              |
|             | Yes.         | Describe            | Name of Entity and Percent of Ownership:   | 0.00                         |
|             | 0            |                     |  | \$0.00                       |
| 20.         |              | =                   | e bonds and other negotiable and non-negotiable instruments  |                              |
|             | -            |                     | e personal checks, cashiers' checks, promissory notes, and money orders. re those you cannot transfer to someone by signing or delivering them.  |                              |
|             | No.          |                     | to those you durnist turnish to comeone by againing of duritoring from.  |                              |
|             | Yes.         | Describe            | Issuer name:   |                              |
|             | 1 es.        | Describe            | Todas Hamo.  | \$ 0.00                      |
| 21.         | Retirement   | or pension acc      | counts   | Ψ                            |
|             |              | -                   | RISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans   |                              |
|             | No.          |                     |  |                              |
|             | Yes.         | Describe            | Type of account and Institution name:  |                              |
|             |              | 200020              | 7  | \$ 0.00                      |
| 22.         | Security de  | posits and pre      | payments   | *                            |
|             | =            | -                   | osits you have made so that you may continue service or use from a company   |                              |
|             | Examples: /  | Agreements with la  | andlords, prepaid rent, public utilities (electric, gas, water), telecommunications  |                              |
|             | No.          |                     |  |                              |
|             | Yes.         | Describe            | Institution name or individual:  |                              |
|             |              |                     |  | \$0.00                       |
| 23.         | Annuities (  | A contract for a    | a periodic payment of money to you, either for life or for a number of years)  |                              |
|             | No.          |                     |  |                              |
|             | Yes.         | Describe            | Issuer name and description:   |                              |
|             | <u>—</u>     |                     |  | \$0.00                       |
| 24.         | Interests in | an education l      | RA, in an account in a qualified ABLE program, or under a qualified state tuition program.   |                              |
|             | 26 U.S.C. §  | § 530(b)(1), 529A   | (b), and 529(b)(1).  |                              |
|             | No.          |                     |  |                              |
|             | Yes.         | Describe            | Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):   |                              |
|             |              |                     |  | \$ <u> </u>                  |
| 25.         | Trusts, equ  | iitable or future   | interests in property (other than anything listed in line 1), and rights or powers   |                              |
|             | No.          |                     |  |                              |
|             | Yes.         | Describe            |  |                              |
|             |              |                     |  | \$ <u>0.0</u> 0              |
| 26.         | Patents, co  | pyrights, trade     | marks, trade secrets, and other intellectual property  |                              |
|             | Examples: I  | nternet domain na   | ames, websites, proceeds from royalties and licensing agreements   |                              |
|             | No.          |                     |  |                              |
|             | Yes.         | Describe            |  |                              |
|             |              |                     |  | \$ <u> </u>                  |
| 27.         | Licenses, f  | ranchises, and      | other general intangibles  |                              |
|             |              | Building permits, e | exclusive licenses, cooperative association holdings, liquor licenses, professional licenses   |                              |
|             | No.          |                     |  |                              |
|             | Yes.         | Describe            |  |                              |
|             |              |                     |  | \$0 <u>.0</u> 0              |
|             |              |                     |  |                              |
| Мо          | ney or prop  | erty owed to yo     | u?   | Current value of the         |
|             |              |                     |  | portion you own?             |
|             |              |                     |  | Do not deduct secured claims |
|             |              |                     |  | or exemptions                |
| 28.         | Tax refund   | s owed to you       |  |                              |
|             | No.          |                     |  |                              |
|             | <b>=</b>     | Describe            |  |                              |
|             | Yes.         | Describe            |  | \$ 0.00                      |
| 20          | Family sup   | nort                |  | φ <u> </u>                   |
| <b>2</b> 3. |              | -                   | sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  |                              |
|             | No.          | or romp (           | 77. Proceedings of the control of th |                              |
|             | Yes.         | Describe            |  |                              |
|             | 1 cs.        | 20001100            |  | \$ 0.00                      |
|             |              |                     |  | Ψ                            |

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| 30. | Other amounts someone  | owes you   |                                       |
|-----|--|--|---------------------------------------|
|     |  | sability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, aid loans you made to someone else  |                                       |
|     | Yes. Describe  |  | \$ 0.00                               |
| 31. |  | or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  | · · · · · · · · · · · · · · · · · · · |
|     | No.  | Company Name & Beneficiary:  |                                       |
|     | Yes. Describe  | Term Life Insurance - no cash surrender value \$0  | s 0.00                                |
| 32. | Any interest in property t   | nat is due you from someone who has died   | ·                                     |
|     | If you are the beneficiary of a property because someone has No.                                 | living trust, expect proceeds from a life insurance policy, or are currently entitled to receive as died.  |                                       |
|     | Yes. Describe  |  | s 0.00                                |
| 33. | Claims against third parti   | es, whether or not you have filed a lawsuit or made a demand for payment   | · · · · · · · · · · · · · · · · · · · |
|     |  | ment disputes, insurance claims, or rights to sue  |                                       |
|     | Yes. Describe  |  | \$0.00                                |
| 34. | Other contingent and unl   | quidated claims of every nature, including counterclaims of the debtor and rights  |                                       |
|     | Yes. Describe  |  | \$0.00                                |
| 35. | Any financial assets you   | did not already list   |                                       |
|     | No.  |  |                                       |
|     | Yes. Describe  |  | \$0.00                                |
| 36  | Add the dollar value of all  | of your entries from Part 4, including any entries for pages you have attached   |                                       |
|     |  | er here  | \$3.00                                |
|     |  |  |                                       |
| P   | art 5  | siness-Related Property You Own or Have an Interest In. List any real estate in Part 1.  |                                       |
|     |  | egal or equitable interest in any business-related property?   |                                       |
|     | No.  |  |                                       |
|     | Yes.   |  |                                       |
|     | _  |  | Current value of the                  |
|     |  |  | portion you own?                      |
|     |  |  | Do not deduct secured claims          |
|     | A  |  | or exemptions                         |
| 38. | No.  | ommissions you already earned  |                                       |
|     | Yes. Describe  |  | \$ 0.00                               |
| 39. | Office equipment, furnish  | ings and simplies  |                                       |
|     |  | computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  |                                       |
|     | No.  Yes. Describe   |  |                                       |
| 40. | No. Yes. Describe  Machinery, fixtures, equip  |  | \$0 <u>.00</u> 0                      |
| 40. | No.  Yes. Describe  Machinery, fixtures, equipmone   | computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  | \$ <u>0.0</u> 0                       |
|     | No.  Yes. Describe  Machinery, fixtures, equipment No.  Yes. Describe                            | computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  | \$0.00<br>\$0                         |
|     | No.  Yes. Describe  Machinery, fixtures, equipmone   | computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  | <u></u>                               |
|     | No. Yes. Describe  Machinery, fixtures, equipments No. Yes. Describe                             | computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  | <u></u>                               |
| 41. | No. Yes. Describe  Machinery, fixtures, equipment No. Yes. Describe  Inventory No.               | computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  ment, supplies you use in business, and tools of your trade | \$ <u>0.0</u> 0                       |
| 41. | No. Yes. Describe  Machinery, fixtures, equipment No. Yes. Describe  Inventory No. Yes. Describe | computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  ment, supplies you use in business, and tools of your trade | \$ <u>0.0</u> 0                       |

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| 43. Customer lists, mailing lists, or other compilations  No.  |                 |
|--|-----------------|
| Yes. Describe  | \$ <u>0.0</u> 0 |
| 44. Any business-related property you did not already list   |                 |
| Yes. Describe  | \$ <u>0.0</u> 0 |
| 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here>                 | \$ 0.00         |
|  |                 |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  If you own or have an interest in farmland, list it in Part 1. |                 |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.   |                 |
| Yes. Describe  | \$ 0.00         |
| 47. Farm animals  Examples: Livestock, poultry, farm-raised fish   | ş <u> </u>      |
| Yes. Describe  | 7               |
| 48. Crops—either growing or harvested  | \$0.00          |
| No.  Yes. Describe   | 7               |
| 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  | \$ <u>0.0</u> 0 |
| No.  | _               |
| Yes. Describe  | \$0.00          |
| 50. Farm and fishing supplies, chemicals, and feed No.   |                 |
| Yes. Describe  | \$ 0.00         |
| 51. Any farm- and commercial fishing-related property you did not already list  No.  | _               |
| Yes. Describe  | \$ 0.00         |
| 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached   |                 |
| for Part 6. Write that number here   | \$0.00          |
|  |                 |
| Describe All Property You Own or Have an Interest in That You Did Not List Above   |                 |
| 53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No.                                       |                 |
| Yes. Describe  |                 |
|  | \$0.00          |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here>   | \$0.00          |

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Middle Name

| Part 8: List the Totals of Each Part of this Form                       |              |              |
|---|--------------|--------------|
| 55. Part 1: Total real estate, line 2                                   |              | \$ 0.00      |
| 56. Part 2: Total vehicles, line 5                                      | \$ 21,225.00 |              |
| 57. Part 3: Total personal and household items, line 15                 | \$ 700.00    |              |
| 58. Part 4: Total financial assets, line 36                             | \$ 3.00      |              |
| 59. Part 5: Total business-related property, line 45                    | \$ 0.00      |              |
| 60. Part 6: Total farm- and fishing-related property, line 52           | \$ 0.00      |              |
| 61. Part 7: Total other property not listed, line 54                    | \$ 0.00      |              |
| 62. Total personal property. Add lines 56 through 61                    | \$ 21,928.00 | \$ 21,928.00 |
| 63. <b>Total of all property on Schedule A/B.</b> Add line 55 + line 62 |              | \$21,928.00  |

Schedule A/B: Property Page 6 of 6 Official Form 106A/B Record # 708074

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| Fill in this in     | formation to iden   | tify your case:                       |                     |  |
|---------------------|---------------------|---------------------------------------|---------------------|--|
| Debtor 1            | Angelina            |                                       | Baltazar            |  |
|                     | First Name          | Middle Name                           | Last Name           |  |
| Debtor 2            |                     |                                       |                     |  |
| (Spouse, if filing) | First Name          | Middle Name                           | Last Name           |  |
| United States       | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | ILLINOIS<br>(State) |  |
| Case Number         | r                   |                                       | _                   |  |
| (If known)          |                     |                                       |                     |  |

## Official Form 106C

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|   | emptions are you claiming? Check<br>ming state and federal nonbankrupt |                                      |   |                                      |  |  |  |  |  |
|---|--|--------------------------------------|---|--------------------------------------|--|--|--|--|--|
| You are clair   | ming federal exemptions. 11 U.S.C.                                     | § 522(b)(2)                          |   |                                      |  |  |  |  |  |
|   |  |                                      |   |                                      |  |  |  |  |  |
| 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. |  |                                      |   |                                      |  |  |  |  |  |
| •   | on of the property and line on<br>hat lists this property              | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption   |  |  |  |  |  |
|   |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                      |  |  |  |  |  |
| Brief description:  | 2015 Toyota Rav4 with over 13,000 miles                                | \$_ 21,225                           | \$ _ 2,400  | 735 ILCS 5/12-1001(c) - \$2,400.00   |  |  |  |  |  |
| Line from Schedule A/B:   | 03   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |  |  |  |
| Brief<br>description:   | Furniture, linens, small appliances, table & chairs, bedroom set       | \$_500                               | <b>\$</b>   | 735 ILCS 5/12-1001(b) - \$500.00     |  |  |  |  |  |
| Line from Schedule A/B:   | 06   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |  |  |  |
| Brief description:  | Flat screen TV, computer, printer, music collection, cell phone        | \$ <u>100</u>                        | <b>\$</b>   | 735 ILCS 5/12-1001(b) - \$100.00     |  |  |  |  |  |
| Line from Schedule A/B:   | 07   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |  |  |  |
| Brief description:  | Everyday clothes, shoes, accessories                                   | \$ <u>100</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(a),(e) - \$100.00 |  |  |  |  |  |
| Line from<br>Schedule A/B:  | 11   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |  |  |  |
|   |  |                                      |   |                                      |  |  |  |  |  |
| Official Form 106C  | Record # 708074  | Schodulo C: T                        | he Property You Claim as Exempt                                 | Page 1 of 2                          |  |  |  |  |  |

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Debtor 1 Angelina First Name

Document Last Name

Middle Name

|    | Part 2⊪ Addit           | tional Page   |                   |                                      |   |                             |             |
|----|-------------------------|---|-------------------|--------------------------------------|---|-----------------------------|-------------|
|    |                         | on of the property and li<br>that lists this property |                   | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow    | exemption   |
|    |                         |   |                   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                             |             |
|    | Brief description:      | Other financial account, Bank Liquid Card, 3.00       | Chase             | \$_3                                 | <b>\$</b>   | 735 ILCS 5/12-1001(b) - \$3 | .00         |
|    | Line from Schedule A/B: | <u>17</u>   |                   |                                      | 100% of fair market value, up to any applicable statutory limit |                             |             |
| 3. | Are you claimir         | ng a homestead exemp                                  | tion of more tha  | n \$155,675?                         |   |                             |             |
|    | (Subject to adju        | stment on 4/01/16 and                                 | every 3 years aff | ter that for cases filed on          | or after the date of adjustment .)                              |                             |             |
|    | No.                     |   |                   |                                      |   |                             |             |
| ĺ  | Yes. Did yo             | u acquire the property o                              | overed by the ex  | cemption within 1.215 da             | lys before you filed this case?                                 |                             |             |
|    | □No                     |   |                   | ,                                    | ,,  |                             |             |
|    | Yes.                    |   |                   |                                      |   |                             |             |
|    | <u> </u>                |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
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|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
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|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
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|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
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|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
|    |                         |   |                   |                                      |   |                             |             |
| 0  | fficial Form 1060       | Record #  | 708074            | Schedule C: Th                       | e Property You Claim as Exempt                                  |                             | Page 2 of 2 |

| Fill in this   | information to identify yo  | our case:   |  | Entered 08/12<br>8 of 55  |  |  |                                   |
|--|---|---|--|---|--|--|-----------------------------------|
| Debtor 1   | Angelina  |   | Baltazar   |   |  |  |                                   |
|  | First Name  | Middle Name   | Last Name  |   |  |  |                                   |
| Debtor 2   |   |   |  |   |  |  |                                   |
| (Spouse, if filing)  | First Name  | Middle Name   | Last Name  |   |  |  |                                   |
| United State   | es Bankruptcy Court for the : _   | NORTHERN D  |  |   |  |  |                                   |
| Case Numb  | er  |   | (State)  |   |  | Check if thi   | s is an                           |
| (If known)   |   |   |  |   |  | amended fi   | ling                              |
| Official F   | Form 106D   |   |  |   |  |  |                                   |
|  |   |   | Claims Secured by P  |   |  |  | 12/                               |
| ∐ No. 0  | Check this box and submit   | this form to the c  | ourt with your other cohedules. Voi  |   |  |  |                                   |
| Yes. F   | Fill in all of the information  |   | ourt with your other scredules. Too  | i nave nothing else to re   | port on this form.   |  |                                   |
| Part 1:  | List All Secured Claims   | below.  |  |   | Column A   | Column A   | Column C                          |
| Part 1:  2. List all s for each  | List All Secured Claims ecured claims. If a credit claim. If more than one c  | or has more than reditor has a parti  | one secured claim, list the creditor icular claim, list the other creditors order according to the creditors nar   | separately<br>n Part 2.   |  | Column A  Value of collateral that supports this claim | Column C Unsecured portion If any |
| Part 1:  2. List all s for each As much  | List All Secured Claims ecured claims. If a credit claim. If more than one c  | or has more than reditor has a parti  | one secured claim, list the creditor cular claim, list the other creditors   | separately<br>n Part 2.<br>ne.  | Column A  Amount of claim  Do not deduct the                     | Value of collateral that supports this                 | Unsecured portion                 |
| 2. List all s for each As much  Toyot  Creditor  | List All Secured Claims  ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit  | or has more than reditor has a parti  | one secured claim, list the creditor cular claim, list the other creditors order according to the creditors nar  | separately<br>in Part 2.<br>ne.<br>s the claim:                           | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2. List all s for each As much  Toyot  Creditor  1111  | ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit s Name  | or has more than reditor has a parti  | one secured claim, list the creditor icular claim, list the other creditors order according to the creditors nar Describe the property that secure   | separately<br>in Part 2.<br>ne.<br>s the claim:                           | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2. List all s for each As much  Toyot  Creditor  | ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit s Name  | or has more than reditor has a parti  | one secured claim, list the creditor icular claim, list the other creditors order according to the creditors nar Describe the property that secure 2015 Toyota Rav4 with over 13,0   | separately in Part 2. ine. s the claim:                                   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2. List all s for each As much  Toyot  Creditor  1111  | ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit s Name  | or has more than reditor has a parti  | one secured claim, list the creditor cular claim, list the other creditors order according to the creditors nar Describe the property that secure: 2015 Toyota Rav4 with over 13,0 As of the date you file, the claim is   | separately in Part 2. ine. s the claim:                                   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2. List all s for each As much  Toyot  Creditor  1111  | ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit is Name W 22Nd St Ste 420 Street  | or has more than reditor has a parti  | one secured claim, list the creditor icular claim, list the other creditors order according to the creditors nar Describe the property that secure 2015 Toyota Rav4 with over 13,0   | separately in Part 2. ine. s the claim:                                   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2. List all s for each As much  Toyot  Creditor  1111 Number   | ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit is Name W 22Nd St Ste 420 Street  | or has more than reditor has a partius in alphabetical of   | one secured claim, list the creditor cular claim, list the other creditors order according to the creditors nar Describe the property that secure:  2015 Toyota Rav4 with over 13,0  As of the date you file, the claim is Contingent  | separately in Part 2. ine. s the claim:                                   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2. List all s for each As much  2.1 Toyot  Creditor 1111 Number  Oak B                                   | ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit is Name W 22Nd St Ste 420 Street  | or has more than reditor has a partius in alphabetical of the second of | one secured claim, list the creditor cular claim, list the other creditors order according to the creditors nar  Describe the property that secure:  2015 Toyota Rav4 with over 13,0  As of the date you file, the claim is Contingent  Unliquidated   | separately in Part 2. ne. s the claim: 00 miles s: Check all that apply.  | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2. List all s for each As much Creditor 1111 Number Oak B City   | ecured claims. If a credit claim. If more than one coas possible, list the claim a Motor Credit is Name W 22Nd St Ste 420 Street  | or has more than reditor has a partius in alphabetical of the second of | one secured claim, list the creditor icular claim, list the other creditors order according to the creditors nare.  Describe the property that secure:  2015 Toyota Rav4 with over 13,0  As of the date you file, the claim is Contingent Unliquidated Disputed  | separately in Part 2. ine. s the claim: 00 miles s: Check all that apply. | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2. List all s for each As much  2.1 Toyot  Creditor 1111 Number  Oak B City  Who owe                     | List All Secured Claims  ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit s Name W 22Nd St Ste 420  Street  Street  State the debt? Check one.   | or has more than reditor has a partius in alphabetical of the second of | one secured claim, list the creditor icular claim, list the other creditors order according to the creditors nare.  Describe the property that secure:  2015 Toyota Rav4 with over 13,0  As of the date you file, the claim is Contingent  Unliquidated  Disputed  Nature of Lien. Check all that apply.   | separately in Part 2. ine. s the claim: 00 miles s: Check all that apply. | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2.1 List all s for each As much Creditor 1111 Number Oak B City  Who ow Debto Debto Debto                | List All Secured Claims  ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit 's Name W 22Nd St Ste 420 Street  Strook IL States the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only | or has more than reditor has a partius in alphabetical of the second of | one secured claim, list the creditor cular claim, list the other creditors order according to the creditors nare describe the property that secures 2015 Toyota Rav4 with over 13,0  As of the date you file, the claim is Contingent Unliquidated Disputed  Nature of Lien. Check all that apply An agreement you made (such as car loan)  Statutory lien (such as tax lien, me   | separately n Part 2. ne. s the claim: 00 miles s: Check all that apply.   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2.1 List all s for each As much Creditor 1111 Number Oak B City  Who ow Debto Debto Debto                | List All Secured Claims  ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit s Name W 22Nd St Ste 420  Street  Street  State the debt? Check one.   | or has more than reditor has a partius in alphabetical of the second of | one secured claim, list the creditor cular claim, list the other creditors order according to the creditors nare.  Describe the property that secure:  2015 Toyota Rav4 with over 13,0  As of the date you file, the claim is Contingent Unliquidated Disputed  Nature of Lien. Check all that apply An agreement you made (such as car loan)  Statutory lien (such as tax lien, metalload) Judgment lien from a lawsuit | separately n Part 2. ne. s the claim: 00 miles s: Check all that apply.   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |
| 2. List all s for each As much  2.1 Toyot  Creditor 1111 Number  Oak B  City  Who ow  Debto Debto At lea | List All Secured Claims  ecured claims. If a credit claim. If more than one c as possible, list the claim a Motor Credit 's Name W 22Nd St Ste 420 Street  Strook IL States the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only | or has more than reditor has a partius in alphabetical of the second of | one secured claim, list the creditor cular claim, list the other creditors order according to the creditors nare describe the property that secures 2015 Toyota Rav4 with over 13,0  As of the date you file, the claim is Contingent Unliquidated Disputed  Nature of Lien. Check all that apply An agreement you made (such as car loan)  Statutory lien (such as tax lien, me   | separately n Part 2. ne. s the claim: 00 miles s: Check all that apply.   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim     | Unsecured<br>portion<br>If any    |

|  | Caso 16 25042 D  | oc 1 Eilad 09/12/16   | Entered 08/12/16 13:01:44   | Desc Main                   |
|--|--|---|---|-----------------------------|
| Fill in this   | s information to identify your case:   |   | 9 of 55   |                             |
| Debtor 1   | Angelina   | Baltazar  |   |                             |
|  | First Name Middle Nam  | ne Last Name  |   |                             |
| Debtor 2   |  |   |   |                             |
| (Spouse, if filin  | ng) First Name Middle Nam  | ne Last Name  |   |                             |
| United Sta   | ates Bankruptcy Court for the :NORTHERN  | District of _ <u>ILLINOIS</u>   |   |                             |
| Case Num   | nber   | (Otate)   |   | Check if this is an         |
| (If known)   |  |   |   | amended filing              |
| <u>Official</u>  | Form 106E/F  |   |   |                             |
| chedu  | le E/F: Creditors Who Ha   | ave Unsecured Claims  |   | 12/15                       |
| ist the othe<br>A/B: Propert<br>reditors wit<br>eeded, cop<br>op of any ac | er party to any executory contracts or u<br>ty (Official Form 106A/B) and on <i>Sched</i><br>th partially secured claims that are liste    | nexpired leases that could result in<br>ule G: Executory Contracts and Une<br>id in Schedule D: Creditors Who Have<br>the entries in the boxes on the left. A<br>ase number (if known). | s and Part 2 for creditors with NONPRIORITY cl<br>a claim. Also list executory contracts on Sched<br>expired Leases (Official Form 106G). Do not inci<br>re Claims Secured by Property. If more space is<br>attach the Continuation Page to this page. On the | lule<br>lude any<br>s       |
| Part 1:  |  |   |   |                             |
| _  | creditors have priority unsecured claim  | is against you?   |   |                             |
| _  | Go to Part 2.  |   |   |                             |
| ∐ Yes.   |  | reditor has more than one priority uns  | ecured claim, list the creditor separately for each   | claim For                   |
| each cla<br>nonprior<br>unsecur  | aim listed, identify what type of claim it is.<br>rity amounts. As much as possible, list th<br>red claims, fill out the Continuation Page | If a claim has both priority and nonpr<br>e claims in alphabetical order according<br>of Part 1. If more than one creditor ho   | iority amounts, list that claim here and show bothing to the creditor's name. If you have more than tilds a particular claim, list the other creditors in Pa  | priority and<br>wo priority |
| (For an  | explanation of each type of claim, see the   | e instructions for this form in the instru  | Total claim   | Priority Nonpriority        |
|  | <b>-</b>   |   |   | amount amount               |
| Part 2:  | List All of Your NONPRIORITY Unsecur   | red Claims  |   |                             |
| 3. Do any o  | creditors have nonpriority unsecured c   | laims against you?  |   |                             |
| No.  | You have nothing to report in this part.   | Submit this form to the court with your   | other schedules.  |                             |
| Yes.   |  |   |   |                             |
| nonprior<br>included   | rity unsecured claim, list the creditor sepa   | arately for each claim. For each claim  | or who holds each claim. If a creditor has more t<br>listed, identify what type of claim it is. Do not list of<br>itors in Part 3.If you have more than three nonprio   | claims already              |
|  | in out the continuation rage or ran 2.   |   |   | Total claim                 |
| 4.1 AME  | or's Name  | Last 4 digits of account number   | NULL  | \$ <u>2,593.00</u>          |
|  | Box 297871   | When was the debt incurred?   | 2013-2016   |                             |
| Numb   | per Street   |   |   |                             |
|  | ·····  | As of the date you file, the claim  | is: Check all that apply.   |                             |
| Fort   | Lauderdale FL 33329  | ☐ Contingent☐ Unliquidated☐   |   |                             |
| City<br>Who ov   | State Zip Code wes the debt? Check one.  | Disputed  |   |                             |
| _  | tor 1 only   |   |   |                             |
| Deb  | tor 2 only   | Type of NONPRIORITY unsecure  | d claim:  |                             |
| =  | tor 1 and Debtor 2 only  | Student loans   |   |                             |
| =  | east one of the debtors and another  | Obligations arising out of a sepa   |   |                             |
|  | eck if this claim relates to a<br>nmunity debt   | that you did not report as priority  Debts to pension or profit-sharing   |   |                             |
|  | claim subject to offest?   | Social to position of prone-orienting   | 5   |                             |
| No   |  | Other. Specify Credit Card of   | or Credit Use   |                             |
| Yes  |  |   |   |                             |

Doc 1 Filed 08/12/16 Entered 08/12/16 13:01:44 Desc Main Case 16-25943 Page 20 of 55 Case Number (if known) Dacument <u>Ange</u>lina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| 4.2 | Barclays BANK Delaware                             | Last 4 digits of account number           | NULL                         | \$ <u>5,270.00</u> |
|-----|--|---|------------------------------|--------------------|
|     | Creditor's Name                                    |   | 2015 2016                    |                    |
|     | Po Box 8803  | When was the debt incurred?               | 2015-2016                    |                    |
|     | Number Street                                      |   |                              |                    |
|     |  | As of the date you file, the claim is:    | Check all that apply.        |                    |
|     | N/II : 1   | Contingent                                |                              |                    |
|     | Wilmington DE 19899                                | Unliquidated                              |                              |                    |
| Ι,  | City State Zip Code  Who owes the debt? Check one. | Disputed                                  |                              |                    |
|     | Debtor 1 only                                      | _   |                              |                    |
|     | Debtor 2 only                                      | Type of NONPRIORITY unsecured c           | elaim:                       |                    |
|     | Debtor 1 and Debtor 2 only                         | Student loans                             |                              |                    |
|     | At least one of the debtors and another            | Obligations arising out of a separation   | on agreement or divorce      |                    |
|     | Check if this claim relates to a                   | that you did not report as priority cla   | ims                          |                    |
| '   | community debt                                     | Debts to pension or profit-sharing pla    | ans, and other similar debts |                    |
| !   | s the claim subject to offest?                     |   |                              |                    |
|     | No   | Other. Specify Credit Card or C           | Credit Use                   |                    |
|     | Yes Capital ONE BANK USA N                         |   | NII II I                     | * 2 220 00         |
| 4.3 | <del>!</del>                                       | Last 4 digits of account number           | NULL                         | \$ <u>3,339.00</u> |
|     | Creditor's Name<br>15000 Capital One Dr            | When was the debt incurred?               | 2012-2015                    |                    |
|     | Number Street                                      | mon was the asst mountain.                |                              |                    |
|     | Names Cases  |   |                              |                    |
|     |  | As of the date you file, the claim is:    | Check all that apply.        |                    |
|     | Richmond VA 23238                                  | Contingent                                |                              |                    |
|     | City State Zip Code                                | Unliquidated                              |                              |                    |
| '   | Who owes the debt? Check one.                      | Disputed                                  |                              |                    |
|     | Debtor 1 only                                      |   |                              |                    |
|     | Debtor 2 only                                      | Type of NONPRIORITY unsecured of          | laim:                        |                    |
|     | Debtor 1 and Debtor 2 only                         | Student loans                             |                              |                    |
|     | At least one of the debtors and another            | Obligations arising out of a separation   |                              |                    |
|     | Check if this claim relates to a                   | that you did not report as priority cla   |                              |                    |
| Ι,  | community debt s the claim subject to offest?      | Debts to pension or profit-sharing plants | ans, and other similar debts |                    |
| i   | No   | Other, Specify Credit Card or C           | Cradit I Isa                 |                    |
|     | Yes  | Other. Specify Credit Card or C           | Steak ode                    |                    |
| 4.4 | CBNA   | Last 4 digits of account number           | NULL                         | \$ <u>2,003.00</u> |
|     | Creditor's Name                                    |   |                              |                    |
|     | 50 Northwest Point Road                            | When was the debt incurred?               | 2015-2016                    |                    |
|     | Number Street                                      |   |                              |                    |
|     |  | As of the date you file, the claim is:    | Check all that apply.        |                    |
|     |  | Contingent                                |                              |                    |
|     | Elk Grove Village IL 60007                         | Unliquidated                              |                              |                    |
| ١,  | City State Zip Code  Who owes the debt? Check one. | Disputed                                  |                              |                    |
|     | Debtor 1 only                                      | _   |                              |                    |
|     | Debtor 2 only                                      | Type of NONPRIORITY unsecured c           | elaim:                       |                    |
|     | Debtor 1 and Debtor 2 only                         | Student loans                             |                              |                    |
|     | At least one of the debtors and another            | Obligations arising out of a separation   | on agreement or divorce      |                    |
|     | Check if this claim relates to a                   | that you did not report as priority cla   |                              |                    |
| '   | community debt                                     | Debts to pension or profit-sharing pla    | ans, and other similar debts |                    |
|     | s the claim subject to offest?                     |   |                              |                    |
|     | No   | Other. Specify Credit Card or C           | Credit Use                   |                    |
|     | Yes  |   |                              |                    |

Doc 1 Filed 08/12/16 Entered 08/12/16 13:01:44 Desc Main Case 16-25943 Page 21 of 55 Case Number (if known) Document <u>Ange</u>lina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| 4.5 Credit ONE BANK NA                            | Last 4 digits of account number NULL                              | \$ <u>2,180.00</u> |
|---|---|--------------------|
| Creditor's Name                                   |   |                    |
| Po Box 98875                                      | When was the debt incurred? 2014-2016                             |                    |
| Number Street                                     |   |                    |
|   | As of the date were filler than also be a Charlet Hiller to a L   |                    |
|   | As of the date you file, the claim is: Check all that apply.      |                    |
| NV 00402  | Contingent  |                    |
| Las Vegas NV 89193                                | Unliquidated  |                    |
| City State Zip Code Who owes the debt? Check one. | Disputed  |                    |
| _   |   |                    |
| Debtor 1 only                                     |   |                    |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                              |                    |
| Debtor 1 and Debtor 2 only                        | Student loans   |                    |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce      |                    |
| Check if this claim relates to a                  | that you did not report as priority claims                        |                    |
| community debt                                    | Debts to pension or profit-sharing plans, and other similar debts |                    |
| Is the claim subject to offest?                   | Debts to pension of profit-sharing plans, and other similar debts |                    |
| No  | Out - Credit Card or Credit Lice                                  |                    |
| <b>│</b>  | Other. Specify Credit Card or Credit Use                          |                    |
| Yes FNB Omaha                                     | Last 4 digits of account number NULL                              | <b>\$</b> 355.00   |
| 4.0   | Last 4 digits of account number NULL                              | <b>\$</b> _000.00  |
| Creditor's Name                                   | When was the debt incurred? 2015-2016                             |                    |
| Po Box 3412                                       | When was the debt incurred? 2015-2016                             |                    |
| Number Street                                     |   |                    |
|   | As of the date you file, the claim is: Check all that apply.      |                    |
|   | Contingent  |                    |
| Omaha NE 68103                                    |   |                    |
| City State Zip Code                               | Unliquidated  |                    |
| Who owes the debt? Check one.                     | Disputed  |                    |
| Debtor 1 only                                     |   |                    |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                              |                    |
| <b> </b>  | Student loans   |                    |
| Debtor 1 and Debtor 2 only                        |   |                    |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce      |                    |
| Check if this claim relates to a                  | that you did not report as priority claims                        |                    |
| community debt                                    | Debts to pension or profit-sharing plans, and other similar debts |                    |
| Is the claim subject to offest?                   |   |                    |
| No  | Other. Specify Credit Card or Credit Use                          |                    |
| Yes   |   |                    |
| 4.7 Kohls/Capone                                  | Last 4 digits of account number NULL                              | <u>\$ 831.00</u>   |
| Creditor's Name                                   | _ <del></del>   |                    |
| N56 W 17000 Ridgewood Dr                          | When was the debt incurred? 2011-2016                             |                    |
| Number Street                                     |   |                    |
|   |   |                    |
|   | As of the date you file, the claim is: Check all that apply.      |                    |
| Monomonoo Follo W/I 52054                         | Contingent  |                    |
| Menomonee Falls WI 53051                          | Unliquidated  |                    |
| City State Zip Code Who owes the debt? Check one. | Disputed  |                    |
|   |   |                    |
| Debtor 1 only                                     |   |                    |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                              |                    |
| Debtor 1 and Debtor 2 only                        | Student loans   |                    |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce      |                    |
| Check if this claim relates to a                  | that you did not report as priority claims                        |                    |
| community debt                                    | Debts to pension or profit-sharing plans, and other similar debts |                    |
| Is the claim subject to offest?                   | _ , , , , , , , , , , , , , , , , , , ,                           |                    |
| No  | Other. Specify Credit Card or Credit Use                          |                    |
| Nes Nes   | Other. Specify  |                    |

Record # 708074

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| 4.0  |  | Last 4 digits of account number  |                    |
|------|--|--|--------------------|
|      | Creditor's Name                                    |  |                    |
|      | PO Box 95009                                       | When was the debt incurred?  |                    |
|      | Number Street                                      |  |                    |
|      |  | As of the date you file the elements (the district or of the control of the contr |                    |
|      |  | As of the date you file, the claim is: Check all that apply.   |                    |
|      | Chianna II COCOA                                   | Contingent   |                    |
|      | Chicago IL 60694                                   | Unliquidated   |                    |
| Ι.   | City State Zip Code                                | Disputed   |                    |
|      | Who owes the debt? Check one.                      |  |                    |
|      | Debtor 1 only                                      |  |                    |
|      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                    |
|      | Debtor 1 and Debtor 2 only                         | Student loans  |                    |
|      | =  | Obligations arising out of a separation agreement or divorce   |                    |
|      | At least one of the debtors and another            |  |                    |
|      | Check if this claim relates to a                   | that you did not report as priority claims   |                    |
|      | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                    |
|      | ls the claim subject to offest?                    |  |                    |
|      | No   | Other. Specify Medical/Dental Service  |                    |
|      | Yes  |  |                    |
| 40   | Prosper Marketplace IN                             | Last 4 digits of account number 0032   | <b>\$</b> 4,094.00 |
| 4.9  | Creditor's Name                                    | Last 4 digits of decount number  | T                  |
|      |  | When was the debt incurred? 2015-2016  |                    |
|      | 101 2Nd St FI 15                                   | when was the dept incurred?  |                    |
|      | Number Street                                      |  |                    |
|      |  | As of the date you file, the claim is: Check all that apply.   |                    |
|      |  |  |                    |
|      | San Francisco CA 94105                             | Contingent   |                    |
|      |  | Unliquidated   |                    |
| ,    | City State Zip Code  Who owes the debt? Check one. | Disputed   |                    |
|      |  |  |                    |
|      | Debtor 1 only                                      |  |                    |
|      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                    |
|      | Debtor 1 and Debtor 2 only                         | Student loans  |                    |
|      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                    |
|      |  | that you did not report as priority claims   |                    |
|      | Check if this claim relates to a                   |  |                    |
|      | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                    |
|      | Is the claim subject to offest?                    |  |                    |
|      | No   | Other. Specify Personal Loan   |                    |
|      | Yes  |  |                    |
| 4.10 | Syncb/SYNC BANK LUXURY                             | Last 4 digits of account number NULL   | <b>\$</b> 779.00   |
|      | Creditor's Name                                    |  |                    |
|      | 950 Forrer Blvd                                    | When was the debt incurred? 2015-2016  |                    |
|      | Number Street                                      |  |                    |
|      | Number Succe                                       |  |                    |
|      |  | As of the date you file, the claim is: Check all that apply.   |                    |
|      |  | Contingent   |                    |
|      | Kettering OH 45420                                 | Unliquidated   |                    |
|      | City State Zip Code                                |  |                    |
| '    | Who owes the debt? Check one.                      | Disputed   |                    |
|      | Debtor 1 only                                      |  |                    |
|      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                    |
|      |  |  |                    |
|      | Debtor 1 and Debtor 2 only                         | ☐ Student loans  |                    |
|      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                    |
|      | Check if this claim relates to a                   | that you did not report as priority claims   |                    |
|      | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                    |
|      | Is the claim subject to offest?                    | <u> </u>   |                    |
|      | No   | Other. Specify Credit Card or Credit Use   |                    |
|      | Yes  | Other. Specify Orealt Sala of Steam Sec.   |                    |
|      |  |  |                    |

Doc 1 Filed 08/12/16 Entered 08/12/16 13:01:44 Desc Main Case 16-25943 Page 23 of 55 Case Number (if known) Document <u>Ange</u>lina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| 4 44 | Syncb/Walmart                                      | Last 4 digits of account number NULL                              | <b>\$</b> 685.00                |
|------|--|---|---------------------------------|
| 4.11 | Creditor's Name                                    | Last 4 digits of account number                                   | <u> </u>                        |
|      | Po Box 965024                                      | When was the debt incurred? 2015-2016                             |                                 |
|      | Number Street                                      |   |                                 |
|      |  | As of the date you file, the claim is: Check all that apply.      |                                 |
|      |  | Contingent  |                                 |
|      | Orlando FL 32896                                   | Unliquidated  |                                 |
| Ι,   | City State Zip Code  Who owes the debt? Check one. | Disputed  |                                 |
| l ì  | Debtor 1 only                                      |   |                                 |
|      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                                 |
|      | Debtor 1 and Debtor 2 only                         | Student loans   |                                 |
| l i  | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                                 |
| l i  | Check if this claim relates to a                   | that you did not report as priority claims                        |                                 |
| '    | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                                 |
| !    | s the claim subject to offest?                     |   |                                 |
|      | No   | Other. Specify Credit Card or Credit Use                          |                                 |
|      | Yes TCF National Bank                              | Lost 4 divite of account number                                   | <b>\$</b> 1,423.00              |
| 4.12 | Creditor's Name                                    | Last 4 digits of account number                                   | <b>⊅</b> _1, <del>1</del> 20.00 |
|      | PO Box 170995                                      | When was the debt incurred? 2016                                  |                                 |
|      | Number Street                                      |   |                                 |
|      |  | As of the date you file, the claim is: Check all that apply.      |                                 |
|      |  | Contingent  |                                 |
|      | Milwaukee WI 53217                                 | Unliquidated  |                                 |
| Ι,   | City State Zip Code  Who owes the debt? Check one. | Disputed  |                                 |
| l i  | Debtor 1 only                                      |   |                                 |
|      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                                 |
| i    | Debtor 1 and Debtor 2 only                         | Student loans   |                                 |
|      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                                 |
| 1    | Check if this claim relates to a                   | that you did not report as priority claims                        |                                 |
| '    | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                                 |
|      | s the claim subject to offest?                     |   |                                 |
|      | No   | Other. Specify  |                                 |
|      | Yes Verizon Wireless                               | Last 4 digits of account number 3276                              | <b>\$</b> 1,995.00              |
| 4.13 | Creditor's Name                                    | Last 4 digits of account number 32/6                              | <b>\$_1,935.00</b>              |
|      | Po Box 3427  | When was the debt incurred? 2011-2012                             |                                 |
|      | Number Street                                      |   |                                 |
|      |  | As of the date you file, the claim is: Check all that apply.      |                                 |
|      |  | Contingent  |                                 |
|      | Bloomington IL 61702                               | Unliquidated  |                                 |
| Ι,   | City State Zip Code  Who owes the debt? Check one. | Disputed  |                                 |
| l i  | Debtor 1 only                                      |   |                                 |
|      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                                 |
|      | Debtor 1 and Debtor 2 only                         | Student loans   |                                 |
|      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                                 |
| j    | Check if this claim relates to a                   | that you did not report as priority claims                        |                                 |
| '    | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                                 |
|      | s the claim subject to offest?                     |   |                                 |
|      | No   | Other. Specify Unknown Credit Extension                           |                                 |
|      | Yes  |   |                                 |

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Page 24 of 55 Document Debtor 1 Angelina

List Others to Be Notified for a Debt That You Already Listed

| 5. | Use this page only if you have others to be notified about y example, if a collection agency is trying to collect from you 2, then list the collection agency here. Similarly, if you have additional creditors here. If you do not have additional pers | for a debt you<br>more than one | owe to someone else, list the origina<br>e creditor for any of the debts that yo | ıl creditor in Parts 1 or<br>u listed in Parts 1 or 2, list the                                       |  |  |
|----|--|---------------------------------|--|---|--|--|
|    | Northstar Location Services  |                                 | On which entry in Part 1 or Part 2 I   | ist the original creditor?  |  |  |
|    | Name<br>4285 Genesee St.   | _                               | Line 2 of (Check one):   | Part 1: Creditors with Priority Unsecured Claims  |  |  |
|    | Number Street  | _                               |  | Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |
|    | Cheektowaga NY City State Zip 0  | -<br>14225<br>                  | Last 4 digits of account number _  | NULL  |  |  |
|    | Capital Management Services  | oue                             | Ou which cuts in Boat 4 on Boat 6  | Total to a solution of any of the O   |  |  |
|    | Name   | _                               | On which entry in Part 1 or Part 2 I   | _   |  |  |
|    | 726 Exchange St., Ste. 700   | _                               | Line 2 of (Check one):   | Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |  |  |
|    | Number Steet   |                                 |  | Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |
|    | Buffalo NY City State Zip  | 14210                           | Last 4 digits of account number _  | NULL  |  |  |
|    | Nationwide Credit Inc  |                                 | On which entry in Part 1 or Part 2 I   | ist the original creditor?  |  |  |
|    | Name<br>PO Box 26314   | _                               | Line 8 of (Check one):   | Part 1: Creditors with Priority Unsecured Claims  |  |  |
|    | Number Street  | _                               | or (ensurement).   | Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |
|    |  |                                 |  |   |  |  |
|    |  | 18002                           | Last 4 digits of account number _  | <u>3633</u>   |  |  |
|    | City State Zip (   | Code                            |  |   |  |  |
|    | Millennium Credit Consultants  | _                               | On which entry in Part 1 or Part 2 I   | ist the original creditor?  |  |  |
|    | Name<br>PO Box 18160   |                                 | Line 12 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims  |  |  |
|    | Number Street  | _                               |  | Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |
|    |  | _                               |  |   |  |  |
|    | West St. Paul         MN           City         State         Zip 0  | 55118<br>-<br>Code              | Last 4 digits of account number  |   |  |  |
| 1  | otate Zip  |                                 |  |   |  |  |

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Debtor 1 Angelina

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                             |  |            | Total claim |
|-----------------------------|--|------------|-------------|
| Total claims from Part 1    | 6a. Domestic support obligations   | 6a.        | \$0.00      |
|                             | 6b. Taxes and Certain other debts you owe the government   | 6b.        | \$0.00      |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c.        | \$0.00      |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims.  Write that amount here.  | 6d.        | \$0.00      |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.   | 6e.        | \$0.00      |
|                             |  |            | Total claim |
|                             |  |            |             |
| Total claims<br>from Part 2 | 6f. Student loans  | 6f.        | \$0.00      |
|                             | 6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims                                       | 6f.<br>6g. | \$          |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority   |            | Ψ           |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  6h. Debts to pension or profit-sharing plans, and other | 6g.        | \$0.00      |

|       |                        | Caso 16                |  | Filad 09/12/16  | Entor       |   | 13:01:44                             | Desc Main                       |       |
|-------|------------------------|------------------------|--|---|-------------|---|--------------------------------------|---------------------------------|-------|
| Fi    | ll in this in          | formation to identi    | fy your case:  |   |             | 6 of 55   |                                      |                                 |       |
| D     | ebtor 1                | Angelina               |  | Baltazar  |             |   |                                      |                                 |       |
| D     | ebtor 2                | First Name             | Middle Name  | Last Name   |             |   |                                      |                                 |       |
|       | pouse, if filing)      | First Name             | Middle Name  | Last Name   |             |   |                                      |                                 |       |
| U     | nited States           | Bankruptcy Court for t | the : <u>NORTHERN</u> District of  | <u>ILLINOIS</u>   |             |   |                                      |                                 |       |
|       | ase Number<br>f known) |                        |  | (State)   |             |   |                                      | Check if this is amended filing |       |
| Off   | icial F                | orm 106G               |  |   |             | -   |                                      |                                 | 5     |
|       |                        |                        | ry Contracts and   | Unexpired Lea   | ses         |   |                                      |                                 | 12/15 |
| Be as | complete               | and accurate as po     | ossible. If two married peopled, copy the additional page and case number (if known) | e are filing together, both<br>e, fill it out, number the e | h are equal | ly responsible for su<br>attach it to this page | pplying correct<br>. On the top of a | ny                              |       |
| 1. [  | Oo you hav             | e any executory co     | ontracts or unexpired leases   | ?   |             |   |                                      |                                 |       |
|       | _                      |                        | bmit this form to the court with   |   |             |   |                                      |                                 |       |
| L     | ☐ Yes. Fill            | in all of the informa  | ation below even if the contract   | cts or leases are listed in                                 | Schedule A  | A/B: Property (Official                         | Form 106A/B)                         |                                 |       |
| е     |                        | nt, vehicle lease, c   | r company with whom you havell phone). See the instruction                           |   |             |   |                                      |                                 |       |
|       | ·                      |                        | om you have the contract or  | lease   |             | State what the                                  | contract or lease                    | e is for                        |       |
| 2.1   |                        |                        |  |   |             |   |                                      |                                 |       |
|       | Name                   |                        |  |   | -           |   |                                      |                                 |       |
|       | Number                 | Street                 |  |   | -           |   |                                      |                                 |       |
|       | City                   |                        | State Zip  | Code  | -           |   |                                      |                                 |       |
| 2.2   |                        |                        |  |   |             |   |                                      |                                 |       |
|       | Name                   |                        |  |   | -           |   |                                      |                                 |       |
|       | Number                 | Street                 |  |   | -           |   |                                      |                                 |       |
|       | City                   |                        | State Zip  | Code  | -           |   |                                      |                                 |       |
| 2.3   |                        |                        |  |   |             |   |                                      |                                 |       |
|       | Name                   |                        |  |   | -           |   |                                      |                                 |       |
|       | Number                 | Street                 |  |   | -           |   |                                      |                                 |       |
|       |                        |                        |  |   | _           |   |                                      |                                 |       |
|       | City                   |                        | State Zip  | Code  |             |   |                                      |                                 |       |
| 2.4   |                        |                        |  |   |             |   |                                      |                                 |       |
|       | Name                   |                        |  |   | -           |   |                                      |                                 |       |
|       | Number                 | Street                 |  |   | _           |   |                                      |                                 |       |
|       | City                   |                        | State Zip  | ) Code  | -           |   |                                      |                                 |       |
| 2.5   |                        |                        |  |   |             |   |                                      |                                 |       |
| -     | Name                   |                        |  |   | -           |   |                                      |                                 |       |
|       | Number                 | Street                 |  |   | -           |   |                                      |                                 |       |
|       | ишпрег                 | ગાસ્ટા                 |  |   |             |   |                                      |                                 |       |

State Zip Code

City

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| Fill in this information to identify your case: |                     |                                       |                 |  |
|---|---------------------|---------------------------------------|-----------------|--|
| Debtor 1  | lebtor 1 Angelina   |                                       | Baltazar        |  |
|   | First Name          | Middle Name                           | Last Name       |  |
| Debtor 2  |                     |                                       |                 |  |
| (Spouse, if filing)                             | First Name          | Middle Name                           | Last Name       |  |
| United States                                   | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |  |
| Case Number                                     | -                   |                                       |                 |  |
| (If known)                                      |                     |                                       |                 |  |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A       | dditional Pages, write your name ar   | nd case number (if known). Answ          | er every question.   |   |
|-------------|---|--|----------------------|---|
| 1. <b>D</b> | o you have any codebtors? (If you a   | re filing a joint case, do not list eith | ner spouse as a code | btor.)  |
|             | No.   |  |                      |   |
|             | Yes   |  |                      |   |
|             | lithin the last 8 years, have you liverizona, California, Idaho, Lousiiana, N |  | • ,                  | unity property states and territories include and Wisconsin.) |
|             | No. Go to line 3.   |  |                      |   |
|             | Yes. Did your spouse, former spo  | use, or legal equivalent live with yo    | ou at the time?      |   |
|             |   | e or territory did you live?             | Fill ir              | n the name and current address of that person.                |
|             | Name of your spouse, former spouse or   | legal equivalent                         |                      |   |
|             |   |  |                      |   |
|             | Number Street   |  |                      |   |
|             | City  | State                                    | Zip Code             |   |
| 3           | chedule E/F, or Schedule G to fill ou   | at Column 2.                             |                      | Column 2: The creditor to whom you owe the debt               |
|             |   |  |                      | Check all schedules that apply:                               |
| 3.1         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |
| 3.2         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
| _           | City  | State                                    | Zip Code             |   |
| 3.3         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |

Official Form 106H Record # 708074 Schedule H: Your Codebtors Page 1 of 1

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|                  |                           |                                  | Document    | Page 28 of 55                               |  |
|------------------|---------------------------|----------------------------------|-------------|---|--|
| Fill in this     | s information to ident    | tify your case:                  |             |   |  |
| Debtor 1         | Angelina                  |                                  | Baltazar    | <u>r</u>                                    |  |
|                  | First Name                | Middle Name                      | Last Name   |   |  |
| Debtor 2         |                           |                                  |             |   |  |
| (Spouse, if fili | ing) First Name           | Middle Name                      | Last Name   |   |  |
| United Sta       | ates Bankruptcy Court for | the : <u>NORTHERN DISTRICT C</u> | OF ILLINOIS |   |  |
| Case Nun         | mber                      |                                  |             | Check if this is:                           |  |
| (If known)       |                           |                                  |             | An amended filing                           |  |
|                  |                           |                                  |             | A supplement showing post-petition          |  |
|                  |                           |                                  |             | chapter 13 income as of the following date: |  |
| Official         | Form 106I                 |                                  |             | MM / DD / YYYY                              |  |
|                  |                           |                                  |             | IVIIVI / UU / TTTT                          |  |
| Sched            | ule I: Your I             | ncome                            |             |   |  |
|                  |                           |                                  |             |   |  |

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | ort 1: Describe Employment   |  |                         |              |                                   |       |  |
|----|--|--|-------------------------|--------------|-----------------------------------|-------|--|
| 1. | Fill in your employment information  |  | Debtor 1                |              | Debtor 2 or non-filing s          | pouse |  |
|    | If you have more than one job, attach a separate page with information about additional employers.   | Employment status  | X Employed Not employed | Ŀ            | Employed  Not employed            |       |  |
|    | Include part-time, seasonal, or self-employed work.  | Occupation   | Caregiver               |              |                                   |       |  |
|    | Occupation may Include student or homemaker, if it applies.  | Employers name   |                         |              |                                   |       |  |
|    |  | Employers address  |                         |              |                                   |       |  |
|    |  |  | ,                       |              | 2                                 |       |  |
|    |  | How long employed there?   | 1 year                  |              |                                   |       |  |
| Pa | rt 2: Give Details About Monthl  | ly Income  |                         |              |                                   |       |  |
|    | Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. |  |                         |              |                                   |       |  |
|    |  |  |                         | For Debtor 1 | For Debtor 2 or non-filing spouse |       |  |
| 2. |  | y and commissions (before all page all page) was alculate what the monthly wage we |                         | \$1,200.00   | \$0.00                            |       |  |
| 3. | Estimate and list monthly overti   | me pay.  |                         | \$0.00       | \$0.00                            |       |  |
| 4. | Calculate gross income. Add line   | e 2 + line 3.  |                         | \$1,200.00   | \$0.00                            |       |  |

Official Form 106I Record # 708074 Schedule I: Your Income Page 1 of 2

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Debtor 1 Angelina

Angelina Document
Baltazar

First Name Middle Name Last Name

Case Number (if known)

|  |              |   |          | For Debtor 1 | For Debtor 2 or non-filing spouse |                       |
|--|--------------|---|----------|--------------|-----------------------------------|-----------------------|
|  | Сору         | y line 4 here   | 4.       | \$1,200.00   | \$0.00                            |                       |
| 5. <b>L</b>  | ist all      | payroll deductions:   |          |              |                                   |                       |
|  | 5a. <b>T</b> | Fax, Medicare, and Social Security deductions   | 5a.<br>_ | \$0.00       | \$0.00                            |                       |
|  | 5b. <b>N</b> | Mandatory contributions for retirement plans  | 5b.<br>_ | \$0.00       | \$0.00                            |                       |
|  | 5c. <b>V</b> | oluntary contributions for retirement plans   | 5c.      | \$0.00       | \$0.00                            |                       |
|  | 5d. <b>F</b> | Required repayments of retirement fund loans  | 5d.      | \$0.00       | \$0.00                            |                       |
|  | 5e. <b>I</b> | nsurance  | 5e.      | \$0.00       | \$0.00                            |                       |
|  | 5f. <b>C</b> | Domestic support obligations  | 5f.      | \$0.00       | \$0.00                            |                       |
|  | 5g. <b>L</b> | Jnion dues  | 5g.      | \$0.00       | \$0.00                            |                       |
|  | 5h. <b>C</b> | Other deductions. Specify:  | 5h.      | \$0.00       | \$0.00                            |                       |
| 6. <b>A</b>  | dd the       | payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.  | 6.       | \$0.00       | \$0.00                            |                       |
| 7. C   | alcula       | te total monthly take-home pay. Subtract line 6 from line 4.  | 7.       | \$1,200.00   | \$0.00                            |                       |
| 8. <b>L</b>  | ist all      | other income regularly received:  |          |              |                                   |                       |
|  | 8a.          | Net income from rental property and from operating a business,  |          |              |                                   |                       |
|  |              | profession, or farm   |          |              |                                   |                       |
|  |              | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total |          |              |                                   |                       |
|  |              | monthly net income.   | 8a.      | \$0.00       | \$0.00                            |                       |
|  | 8b.          | Interest and dividends  | 8b.      | \$0.00       | \$0.00                            |                       |
|  | 8c.          | Family support payments that you, a non-filing spouse, or a   | 8c.      | \$ 0.00      | \$ 0.00                           |                       |
|  |              | dependent regularly receive   |          |              |                                   |                       |
|  |              | Include alimony, spousal support, child support, maintenance, divorce   |          |              |                                   |                       |
|  |              | settlement, and property settlement.  |          |              |                                   |                       |
|  | 8d.          | Unemployment compensation   | 8d.      | \$0.00       | \$0.00                            |                       |
|  | 8e.          | Social Security   | 8e.      | \$0.00       | \$0.00                            |                       |
|  | 8f.          | Other government assistance that you regularly receive  | 8f.      | \$0.00       | \$0.00                            |                       |
|  |              | Include cash assistance and the value (if known) of any non-cash  | _        |              |                                   |                       |
|  |              | assistance that you receive, such as food stamps (benefits under the  |          |              |                                   |                       |
|  |              | Supplemental Nutrition Assistance Program) or housing subsidies.  |          |              |                                   |                       |
|  |              | Specify:  |          |              |                                   |                       |
|  | 8g.          | Pension or retirement income  | 8g.      | \$0.00       | \$0.00                            |                       |
|  | 8h.          | Other monthly income. Specify:  | 8h       | \$0.00       | \$0.00                            |                       |
| 9.   | Add          | <b>all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9        | \$0.00       | \$0.00                            |                       |
| 10.  | Calc         | ulate monthly income. Add line 7 + line 9.  | 10.      | \$1,200.00 + | \$0.00                            | 64 200 00             |
|  | Add          | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | L        | \$1,200.00   | \$0.00                            | \$1,200.00            |
| State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: |              |   |          |              |                                   |                       |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  |              |   |          |              |                                   | 12. <b>\$1,200.00</b> |
| 13.  |              | ou expect an increase or decrease within the year after you file this form  |          |              |                                   | L                     |
|  | \            | No.<br>Yes. Explain:  |          |              |                                   |                       |

| Fill in this in                 | nformation to identify your   | case:                  |                             |                         |   |                     |
|---------------------------------|---|------------------------|-----------------------------|-------------------------|---|---------------------|
| Debtor 1                        | Angelina  |                        | Baltazar                    | Check i                 | if this is:                                       |                     |
| D.H. O                          | First Name  | Middle Name            | Last Name                   |                         | amended filing                                    |                     |
| Debtor 2<br>(Spouse, if filing) | First Name  | Middle Name            | Last Name                   | -                       | supplement showing po<br>come as of the following | ·                   |
| United States                   | Bankruptcy Court for the :N   | ORTHERN DISTRICT OF    | ILLINOIS                    |                         | · · · · · · · · · · · · · · · · · · ·             |                     |
| Case Number<br>(If known)       | r   |                        | _                           | MI                      | M / DD / YYYY                                     |                     |
| Official F                      | orm 106J  |                        |                             |                         | separate filing for Debto                         |                     |
|                                 |   |                        |                             | — ma                    | aintains a separate hou                           | sehold.             |
|                                 | e J: Your Expe  |                        |                             |                         |   | 12/14               |
| =                               | e and accurate as possible.<br>needed, attach another she                             |                        |                             |                         |   |                     |
| Part 1:                         | Describe Your Household   |                        |                             |                         |   |                     |
| =                               | int case? Go to line 2.  Does Debtor 2 live in a sepando No.  Yes. Debtor 2 must file |                        | · J.                        |                         |   |                     |
| 2. Do you l                     | have dependents?  | X No                   |                             | Dependent's relations   | ship to Dependent's                               | Does dependent live |
| Do not lis<br>Debtor 2          | st Debtor 1 and   |                        | his information for ent     | Debtor 1 or Debtor 2    | age   | with you?  X No     |
|                                 | tate the dependents'  | cuon depend            |                             |                         |   | Yes                 |
| names.                          | tate the dependents   |                        |                             |                         |   | X No                |
|                                 |   |                        |                             |                         |   | Yes                 |
|                                 |   |                        |                             |                         |   | X No                |
|                                 |   |                        |                             |                         |   | Yes                 |
|                                 |   |                        |                             |                         |   | X No                |
|                                 |   |                        |                             |                         |   | Yes                 |
|                                 |   |                        |                             |                         |   | _ No                |
| 2                               |   |                        |                             |                         |   | Yes                 |
| expense                         | expenses include es of people other than and your dependents?                         | X No                   |                             |                         |   |                     |
|                                 |   |                        |                             |                         |   |                     |
|                                 | Estimate Your Ongoing Month expenses as of your bankr                                 |                        | ss you are using this form  | as a supplement in a Ch | napter 13 case to report                          |                     |
| -                               | of a date after the bankrupto   |                        |                             |                         |   |                     |
| -                               | ses paid for with non-cash  | =                      | =                           |                         |   | Vauraymanaa         |
| of such assist                  | ance and have included it o   | on Schedule I: Your II | icome (Oπiciai Form 106i.,  | 1                       |   | Your expenses       |
|                                 | tal or home ownership expe  | enses for your reside  | nce. Include first mortgage | payments and            | 4   | \$0.00              |
| -                               | for the ground or lot.  cluded in line 4:   |                        |                             |                         | 4.  | Ψ0.00               |
|                                 | eal estate taxes  |                        |                             |                         | <b>4</b> a.                                       | \$0.00              |
|                                 | operty, homeowner's, or rent  | ter's insurance        |                             |                         | 4b.   | \$0.00              |
|                                 | ome maintenance, repair, and  |                        |                             |                         | 4c.   | \$0.00              |
|                                 | omeowner's association or co  |                        |                             |                         | 4d.   | \$0.00              |
|                                 |   |                        |                             |                         |   |                     |

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Case 16-25943 Document Baltazar Page 31 of 55 Angelina Debtor 1 Case Number (if known) \_ Middle Name Last Name First Name Your expenses \$0.00 5. Additional Mortgage payments for your residence, such as home equity loans **Utilities:** 6. \$0.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. 6b. Water, sewer, garbage collection \$100.00 Telephone, cell phone, internet, satellite, and cable service 60

|    | 6c. Telephone, cell phone, internet, satellite, and cable service                                     | 6c.  | \$100.00   |
|----|---|------|------------|
|    | 6d. Other. Specify:   | 6d.  | \$<br>0.00 |
| ·. | Food and housekeeping supplies  | 7.   | \$150.00   |
|    | Childcare and children's education costs  | 8.   | \$0.00     |
|    | Clothing, laundry, and dry cleaning   | 9.   | \$20.00    |
| ٥. | Personal care products and services   | 10.  | \$10.00    |
| 1. | Medical and dental expenses   | 11.  | \$10.00    |
| 2. | <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.     | 12.  | \$60.00    |
| 3. | Entertainment, clubs, recreation, newspapers, magazines, and books                                    | 13.  | \$0.00     |
|    | Charitable contributions and religious donations  | 14.  | \$0.00     |
| i. | Insurance.  |      |            |
|    | Do not include insurance deducted from your pay or included in lines 4 or 20.                         |      |            |
|    | 15a. Life insurance   | 15a. | \$0.00     |
|    | 15b. Health insurance   | 15b. | \$144.00   |
|    | 15c. Vehicle insurance  | 15c. | \$80.00    |
|    | 15d. Other insurance. Specify:  | 15d. | \$0.00     |
|    | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.                      |      |            |
|    | Specify:  | 16.  | \$0.00     |
|    | Installment or lease payments:  |      |            |
|    | 17a. Car payments for Vehicle 1   | 17a. | \$625.00   |
|    | 17b. Car payments for Vehicle 2   | 17b. | \$0.00     |
|    | 17c. Other. Specify:  | 17c. | \$0.00     |
|    | 17d. Other. Specify:  | 17d. | \$0.00     |
|    | Your payments of alimony, maintenance, and support that you did not report as deducted                |      |            |
|    | from your pay on line 5, Schedule I, Your Income (Official Form 106I).                                | 18.  | \$0.00     |
| ١. | Other payments you make to support others who do not live with you.                                   |      |            |
|    | Specify:  | 19.  | \$0.00     |
| ١. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. |      |            |
|    | 20a. Mortgages on other property  | 20a. | \$ 0.00    |
|    | 20b. Real estate taxes  | 20b. | \$<br>0.00 |
|    | 20c. Property, homeowner's, or renter's insurance   | 20c. | \$<br>0.00 |
|    |   | 20d. | \$<br>0.00 |
|    | 20d. Maintenance, repair, and upkeep expenses   | 200. |            |

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Case Number (if known)

| Jeptor 1 | / trigen   |   | Duituzui                               | Case Number (if known) |               |            |
|----------|------------|---|--|------------------------|---------------|------------|
|          | First Nam  | e Middle Name                               | Last Name                              |                        |               |            |
| 21.      | Other. Sp  | pecify:                                     |  |                        | 21.           | \$0.00     |
| 22       | Your mon   | thly expense: Add lines 4 through 21.       |  |                        | 22.           | \$1,199.00 |
|          | The result | is your monthly expenses.                   |  |                        |               |            |
|          |            |   |  |                        |               |            |
|          |            |   |  |                        |               |            |
| 23.      | Calculate  | your monthly net income.                    |  |                        |               |            |
|          | 23a.       | Copy line 12 (your comibined monthly i      | ncome) from Schedule I.                |                        | 23a.          | \$1,200.00 |
|          | 23b.       | Copy your monthly expenses from line        | 22 above.                              |                        | 23b. <b>–</b> | \$1,199.00 |
|          | 23c.       | Subtract your monthly expenses from y       | our monthly income.                    |                        | 23c.          | \$1.00     |
|          |            | The result is your monthly net income.      |  |                        |               |            |
|          |            |   |  |                        |               |            |
|          |            |   |  |                        |               |            |
|          |            |   |  |                        |               |            |
|          |            |   |  |                        |               |            |
| 24.      | Do you ex  | spect an increase or decrease in your e     | xpenses within the year after you fi   | ile this form?         |               |            |
|          | For exam   | ole, do you expect to finish paying for you | ır car loan within the year or do you  | expect your            |               |            |
|          | mortgage   | payment to increase or decrease because     | e of a modification to the terms of yo | our mortgage?          |               |            |
|          | X No       |   |  |                        |               |            |
|          | Yes.       | Explain Here:                               |  |                        |               |            |
|          |            |   |  |                        |               |            |
|          |            |   |  |                        |               |            |
|          |            |   |  |                        |               |            |

 Official Form 106J
 Record #
 708074
 Schedule J: Your Expenses
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## Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below                                    |   |
|---|---|
| Did you pay or agree to pay someone who is NO | Γ an attorney to help you fill out bankruptcy forms?  |
| No  |   |
| Yes. Name of Person                           | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
|   |   |
|   |   |
| correct.                                      | d the summary and schedules filed with this declaration and that they are true and            |
| <b>4.</b>                                     |   |
| /s/ Angelina Baltazar Signature of Debtor 1   | Signature of Debtor 2   |
| Date 08/10/2016                               | Data  |
| MM / DD / YYYY                                | DateMM / DD / YYYY  |
|   |   |

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|                     |   |                               | ocament rat     | 400 |  |  |  |
|---------------------|---|-------------------------------|-----------------|-----|--|--|--|
| Fill in this in     | Fill in this information to identify your case: |                               |                 |     |  |  |  |
|                     |   |                               |                 |     |  |  |  |
|                     |   |                               | 5. "            |     |  |  |  |
| Debtor 1            | <u>Angelina</u>                                 |                               | Baltazar        |     |  |  |  |
|                     | First Name                                      | Middle Name                   | Last Name       |     |  |  |  |
|                     |   |                               |                 |     |  |  |  |
| Debtor 2            |   |                               |                 |     |  |  |  |
| (Spouse, if filing) | First Name                                      | Middle Name                   | Last Name       |     |  |  |  |
|                     |   |                               |                 |     |  |  |  |
| United States       | Bankruptcy Court for                            | or the : NORTHERN District of | <u>ILLINOIS</u> |     |  |  |  |
|                     |   |                               | (State)         |     |  |  |  |
| Case Number         | r   |                               |                 |     |  |  |  |
| (If known)          |   |                               |                 |     |  |  |  |
|                     |   |                               |                 |     |  |  |  |
|                     |   |                               |                 |     |  |  |  |

# Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| number (if known). Answer every question.                                 |   |                      |             |                |  |  |  |  |
|---|---|----------------------|-------------|----------------|--|--|--|--|
| Part 1: Give Details About Your Marital Status and Where You Lived Before |   |                      |             |                |  |  |  |  |
| 01. <b>W</b>  | 01. What is your current marital status?  |                      |             |                |  |  |  |  |
| Г   | Married   |                      |             |                |  |  |  |  |
|   | Not married   |                      |             |                |  |  |  |  |
| -   | _   |                      |             |                |  |  |  |  |
| 02 <b>D</b>   | 02 During the last 3 years, have you lived anywhere other than where you live now?  |                      |             |                |  |  |  |  |
| _   | No.   |                      |             |                |  |  |  |  |
| L   | Yes. List all of the places you lived in the last 3 years. Do   | not include where yo | u live now. |                |  |  |  |  |
|   | Debtor 1  | Dates Debtor 1       | Debtor 2:   | Dates Debtor 2 |  |  |  |  |
|   |   | lived there          |             | lived there    |  |  |  |  |
| рі  | ithin the last 8 years, did you ever live with a spouse or I operty states and territories include Arizona, California, d Wisconsin.) |                      |             |                |  |  |  |  |
| _   | No.   |                      |             |                |  |  |  |  |
| [   | Yes. Make sure you fill out Schedule H: Your Codebtors (  | Official Form 106H). |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
| Pari  | Explain the Sources of Your Income  |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |
|   |   |                      |             |                |  |  |  |  |

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Debtor 1 Angelina Baltazar Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$8,100 (est) From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$0 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, \$14,000 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) 401k withdrawal \$4,268 For last calendar year: (January 1 to December 31, 2015) List Certain Payments You Made Before You Filed for Bankruptcy

Case 16-25943 Doc 1 Filed 08/12/16 Entered 08/12/16 13:01:44 Desc Main Page 36 of 55 Document Angelina Baltazar Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments Toyota Motor Credit 1111 W \$ 30,616 Monthly \$ 1,875 ■ Mortgage Car 22Nd St Ste 420 Oak Brook IL Credit card 60523 Loan repayment Suppliers or vendors Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment Include creditor's name payment

Part 4:

Identify Legal actions, Repossessions, and Foreclosures

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Angelina Baltazar Case Number (if known) Debtor 1 First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Yes. Fill in the details. Nature of the case Court or agency Status of the case 10 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11 Yes. Fill in the information below. 11 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Go to line 11 Yes. Fill in the information below. 12 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No. Yes. **List Certain Gifts and Contributions** Part 5: 13 Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No. Yes. Fill in the details for each gift. 14 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift. List Certain Losses Part 6: 15 Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No. Yes. Fill in the details for each gift. Part 7: **List Certain Payments or Transfers** Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Geraci Law L.L.C. Payment/Value: \$2,095.00: \$865.00 55 E. Monroe Street #3400 paid prior to filing. balance to be paid Chicago, IL 60603 after case filing.

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Debtor 1 Angelina Baltazar Case Number (if known)

First Name Middle Name Last Name

Party Contact Info

Description and value of any property transferred

Date payment Amount of payment Case Number (if known)

|    | Party Contact Info   | Description and value of   | any property transferred      | Date payme or transfer   | nt Amount of payment                    |
|----|--|--|-------------------------------|--------------------------|---|
|    | Hananwill Credit Counseling  | Credit Counseling Services   | 3                             | 2016                     | \$25.00                                 |
|    | 115 N. Cross St.   |  |                               |                          |   |
|    | Robinson, IL 62454   |  |                               |                          |   |
|    |  |  |                               |                          |   |
|    |  |  |                               |                          |   |
|    |  |  |                               |                          |   |
|    |  |  |                               |                          |   |
| 17 | Within 1 year before you filed for bankruptcy<br>promised to help you deal with your creditor<br>Do not include any payment or transfer that   | rs or to make payments to your cre                                   |                               | er any property to anyo  | ne who                                  |
|    | No.  |  |                               |                          |   |
|    | Yes. Fill in the details.  |  |                               |                          |   |
| 18 | Within 2 years before you filed for bankrupto<br>transferred in the ordinary course of your bu<br>Include both outright transfers and transfers<br>Do not include gifts and transfers that you h   | usiness or financial affairs?<br>s made as security (such as the gra | nting of a security interes   |                          | -                                       |
|    | _  | ave alleady listed off this statemen                                 |                               |                          |   |
|    | ■ No.  Yes. Fill in the details for each gift.   |  |                               |                          |   |
| 19 | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-p  |  | o a self-settled trust or si  | milar device of which yo | ou are a                                |
|    | _  | rotection devices.   |                               |                          |   |
|    | No.  Yes. Fill in the details for each gift.   |  |                               |                          |   |
|    | Tes. Till ill the details for each gift.   |  |                               |                          |   |
| P  | List Certain Financial Accounts, Instru  | uments, Safe Deposit Boxes, and Stor                                 | age Units                     |                          |   |
| 20 | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated to the same series of the savings o | r other financial accounts; certifica                                | ites of deposit; shares in    |                          |   |
|    | No.  |  |                               |                          |   |
|    | Yes. Fill in the details.  |  |                               |                          |   |
|    |  | Last 4 digits of account number                                      | Type of account or instrument |                          | Last balance before closing or transfer |
|    |  |  |                               |                          |   |
| 21 | Do you now have, or did you have within 1 y cash, or other valuables?  | rear before you filed for bankruptcy                                 | , any safe deposit box or     | other depository for se  | curities,                               |
|    | No.  |  |                               |                          |   |
|    | Yes. Fill in the details.  |  |                               |                          |   |
|    |  | Who else had access to it?   | Describe the content          |                          | Do you still have it?                   |
| 22 | Have you stored property in a storage unit o   | or place other than your home withi                                  | n 1 year before you filed t   |                          | ,                                       |
|    | No.  | -  | -                             | -                        |   |
|    | Yes. Fill in the details.  |  |                               |                          |   |
|    |  | Who else has or had access to it?                                    | Describe the content          |                          | Do you still<br>have it?                |
| P  | art 9: Identify Property You Hold or Control   | for Someone Else   |                               |                          |   |
|    |  |  |                               |                          |   |
|    |  |  |                               |                          |   |
|    |  |  |                               |                          |   |
|    |  |  |                               |                          |   |

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| Debto | r 1    | Angelina  |                 | Baltazar  | Case Number (if known)                      |                    |
|-------|--------|---|-----------------|---|---|--------------------|
|       |        | First Name  | Middle Name     | Last Name   |   |                    |
| 23    | -      | you hold or control any prop<br>someone.                      | perty that so   | meone else owns? Include any property   | you borrowed from, are storing for, or ho   | ld in trust        |
|       | =      | No.<br>Yes. Fill in the details.                              |                 |   |   |                    |
|       |        |   |                 | Where is the property?  | Describe the property                       | Value              |
| Pa    | rt 10  | Give Details About Envir                                      | onmental Info   | ormation  |   |                    |
| For   | the p  | ourpose of Part 10, the follo                                 | wing definiti   | ons apply:  |   |                    |
| 1     | hazaı  | rdous or toxic substances,                                    | wastes, or m    | or local statute or regulation concerning<br>naterial into the air, land, soil, surface wa<br>the cleanup of these substances, wastes | ter, groundwater, or other medium,          |                    |
|       |        | means any location, facility,<br>used to own, operate, or uti |                 |   | , whether you now own, operate, or utilize  | •                  |
|       |        | rdous material means anyth<br>tance, hazardous material,      | _               | ronmental law defines as a hazardous wa<br>ntaminant, or similar term.  | ste, hazardous substance, toxic             |                    |
| Rep   | ort a  | II notices, releases, and pro                                 | oceedings th    | at you know about, regardless of when the   | ney occurred.                               |                    |
| 24    | Has    | any governmental unit noti                                    | fied you that   | you may be liable or potentially liable ur  | nder or in violation of an environmental la | ıw?                |
|       | =      | No.<br>Yes. Fill in the details.                              |                 |   |   |                    |
|       | _      |   |                 | Governmental unit   | Environmental law, if you know it           | Date of notice     |
| 25    | Have   | e you notified any governm                                    | ental unit of   | any release of hazardous material?  |   |                    |
|       | 1      | No.   |                 |   |   |                    |
|       |        | Yes. Fill in the details.                                     |                 |   |   |                    |
|       |        |   |                 | Governmental unit   | Environmental law, if you know it           | Date of notice     |
| 26    | _      |   | dicial or adn   | ninistrative proceeding under any environ   | nmental law? Include settlements and ord    | iers.              |
|       | _      | No.<br>Yes. Fill in the details.                              |                 |   |   |                    |
|       |        |   |                 | Court or agency   | Nature of the case                          | Status of the case |
| Pa    | rt 11: | Give Details About Your                                       | Business or (   | Connections to Any Business   |   |                    |
| 27    | With   | nin 4 years before you filed                                  | for bankrupt    | cy, did you own a business or have any o  | of the following connections to any busin   | ess?               |
|       |        | A sole proprietor or self-                                    | employed in     | a trade, profession, or other activity, eit   | her full-time or part-time                  |                    |
|       |        | A member of a limited lia                                     | ability compa   | any (LLC) or limited liability partnership (  | LLP)  |                    |
|       |        | A partner in a partnershi                                     | -               |   |   |                    |
|       |        | An officer, director, or m                                    | anaging exe     | cutive of a corporation   |   |                    |
|       |        | An owner of at least 5%                                       | of the voting   | or equity securities of a corporation   |   |                    |
|       | 1      | No. None of the above applie                                  | es. Go to Par   | t 12.   |   |                    |
|       | □ `    | Yes. Check all that apply abo                                 | ove and fill in | the details below for each business.  |   |                    |
| 28    |        | nin 2 years before you filed to                               | -               | cy, did you give a financial statement to a   | anyone about your business? Include all     | financial          |
|       | =      | No.   |                 |   |   |                    |
|       | П,     | Yes. Fill in the details.                                     |                 | Data issued   |   |                    |
|       |        |   |                 | Date issued   |   |                    |
|       |        |   |                 |   |   |                    |
|       |        |   |                 |   |   |                    |
|       |        |   |                 |   |   |                    |

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Debtor 1 Angelina Baltazar Case Number (if known) \_\_\_\_\_\_\_\_

| Sign Below   |  |
|--|--|
| answers are true and correct. I understand that making | al Affairs and any attachments, and I declare under penalty of perjury that the ng a false statement, concealing property, or obtaining money or property by fraud nes up to \$250,000, or imprisonment for up to 20 years, or both. |
| 🗶 /s/ Angelina Baltazar                                | ×  |
| Signature of Debtor 1                                  | Signature of Debtor 2  |
| Date 08/10/2016<br>MM / DD / YYYY                      | DateMM / DD / YYYY   |
| Did you attach additional pages to Your Statement or   | f Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?   |
| No   |  |
| Yes  |  |
| Did you pay or agree to pay someone who is not an a    | attorney to help you fill out bankruptcy forms?  |
| No   |  |
| Yes. Name of person                                    | Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).   |
|  |  |

Eilad 09/12/16 Entered 08/12/16 13:01:44 Desc Main Fill in this information to identify your case: Baltazar Angelina Debtor 1 Last Name First Name Middle Name Debtor 2 First Name Middle Name Last Name (Spouse, if filing) United States Bankruptcy Court for the : <u>NORTHERN DISTRICT OF ILLINOIS EASTERN</u> DIVISION District of ILLINOIS Check if this is an amended filing Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: ■ creditors have claims secured by your property, or ■ you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list. If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). **List Your Creditors Who Have Secured Claims** 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? ☐ Surrender the property No Creditor's name: **Toyota Motor Credit** Retain the property and redeem it ☐ Yes Retain the property and enter into a 2015 Toyota Rav4 with over 13,000 miles Description of Reaffirmation Agreement. property securing debt: Retain the property and [explain]: ☐ Surrender the property □ No Creditor's name: Retain the property and redeem it ☐ Yes Retain the property and enter into a Description of Reaffirmation Agreement. property

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First Name

| List Your Unexpired Personal Property Leases   |   |
|--|---|
| For any unexpired personal property lease that you listed in Schedule G: Executory Co.       | ntracts and Unexpired Leases (Official Form 106G),    |
| fill in the information below. Do not list real estate leases. Unexpired leases are leases t | hat are still in effect; the lease period has not yet |
| ended. You may assume an unexpired personal property lease if the trustee does not as        | ssume it. 11 U.S.C. § 365(p)(2).                      |
|  |   |
| Describe your unexpired personal property leases   | Will the lease be assumed?                            |
| Lessor's name:   | ☐ No  |
|  | ☐ Yes   |
| Description of leased property:  |   |
| property.  |   |
| Lessor's name:   | ☐ No  |
|  |   |
| Description of leased  | 163   |
| property:  |   |
|  | _   |
| Lessor's name:   | □ No  |
| Description of learned   | Yes   |
| Description of leased property:  |   |
| p.oporty.  |   |
| Lessor's name:   | □No   |
|  |   |
| Description of leased  |   |
| property:  |   |
| Lancada acono  | □h.i  |
| Lessor's name:   |   |
| Description of leased  | □Yes  |
| property:  |   |
|  |   |
| Lessor's name:   | □No   |
|  |   |
| Description of leased  |   |
| property:  |   |
| Lessor's name:   | □ No  |
| Lesson s name.   |   |
| Description of leased  | ☐ Yes   |
| property:  |   |
|  |   |
| Part 3: Sign Below   |   |
|  |   |
| Inder penalty of perjury, I declare that I have indicated my intention about any property    | of my estate that secures a debt and any              |
| personal property that is subject to an unexpired lease.                                     |   |
| 4-   |   |
| ★ Isl Angelina Baltazar Signature of Debtor 1 Signature of Debtor                            | 2   |
|  | <u>-</u>  |
| Date   |   |
| MM / DD / YYYY MM / DD / Y   | T T T   |

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In   | re   |  |                             |
|------|--|--|-----------------------------|
| Ang  | gelina Baltazar / Debtor   | Case No:                                       |                             |
|      |  | Chapter:                                       | Chapter 7                   |
|      | DISCLOSURE OF COM  | PENSATION OF ATTORNEY FOR DEI                  | BTOR                        |
|      | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) appensation paid to me within one year before the filing of the dered or to be rendered on behalf of the debtor(s) in contempts. | e petition in bankruptcy, or agreed to be paid | d to me, for services       |
|      | For legal services, I have agreed to accept  | \$2,095.00                                     |                             |
|      | Prior to the filing of this statement I have received  | \$865.00                                       |                             |
|      | Balance Due  | \$1,230.00                                     |                             |
| 2.   | The source of the compensation paid to me was:   |  |                             |
|      | Debtor(s) Other: (specify  |  |                             |
| 3.   | The source of compensation to be paid to me is:  |  |                             |
|      | Debtor(s) Other: (specify  |  |                             |
| 4.   | I have not agreed to share the above-disclosed compe   | ensation with any other person unless they ar  | re members and associates   |
| of r | n <mark>v law</mark> firm.   |  |                             |
|      | I have agreed to share the above-disclosed compensa  | tion with a other person or persons who are    | not members or associates   |
| 5.   | In return for the above-disclosed fee, I have agreed to rend   |  |                             |
|      | case, including:   |  | . ,                         |
| ban  | Analysis of the debtor's financial situation, and rende kruptcy;   | ering advice to the debtor in determining wh   | ether to file a petition in |
|      | b. Preparation and filing of any petition, schedules, state  | ements of affairs and plan which may be req    | uired;                      |
|      | c. Representation of the debtor at the meeting of creditor   | rs and confirmation hearing, and any adjour    | ned hearings thereof;       |
| 6.   | By agreement with the debtor(s), the above-disclosed fee of  | loes not include the following service:        |                             |
|      | Fee does NOT include missed meeting or court da  |  | •                           |
| cha  | pter, judicial lien avoidances, dischargeability actions, other  | contested matters except the first meeting of  | of creditors.               |
|      |  | ERTIFICATION                                   |                             |
|      | I certify that the foregoing is a complete s payment to  | tatement of any agreement or arrangement f     | or                          |
|      | me for representation of the debtor(s) in this b   |  |                             |
|      | <del></del>  | s/ Christine Michelle Kuhlman                  |                             |
|      | Date   | Signature of Attorney                          |                             |
|      | _  | Geraci Law L.L.C.<br>Name of law firm          |                             |

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Case National Backuranters C51 E. Meille ds06/1/2/406 Chidagot of Consultation Attorney: Record #: 708-074 Date: 4/22/2016

Record #: 708-074



## **Chapter 7 Retainer Agreement**

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter7 bankruptcy under the following

Attorney fees for the Chapter 7 bankruptcy are \$ 2005. This amount does NOT INCLUDE court filing fees of \$335, or obsts for credit counseling or financial management classes. This fee is based on the anticipated amount of work required to complete my case, and upon the information I have provided to date. If any information is incomplete or incorrect, the advice or Chapter may have to change, and this fee may have to be adjusted. This fee includes all work in the representation of my normal Chapter7, including preparation of my bankruptcy petition, schedules and other documents, first341 meeting, reaffirmations, normal correspondence with my creditors and myself, but does NOT include excessive work caused by you, missed341 meetings, reopening the case, amendments to schedules, work on audits or asset cases, objections to exemptions, conversion to another chapter, evidentiary hearings, other contested matters or motions, or adversary proceedings, because these cannot be predicted in setting a flat fee. For work done on these matters, we bill between \$275/hr and \$450/hr for attorney time, based on the attorney doing the work, and \$85 to \$125/hr paralegal time. I agree that more than one attorney and paralegal will work on my case.

Fees are "flat fees" and "advance payment retainers" for pre-filing work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". You may elect to be billed on an hourly basis, but we have found a flat fee is cheaper and benefits you. If this contract is terminated by either party prior to the filing of the case, the firm will refund unearned fees based on the above rates with an accounting, and on request, submit any dispute to binding arbitration within30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

I understand that bankruptcy laws only allow me to protect a certain amount of my property, and if I have any unprotected property, I understand my Chapter 7 Trustee can sell it if I do not or cannot buy out the Trustee's interest and that the U.S. Trustee may object to my filing a Chapter 7 if they believe I have excess income and should be filing a Chapter 13.

I agree to fully cooperate with my attorneys and provide all information requested at any point during the case. I understand that if I do not fully cooperate or provide complete and accurate information, my attorneys may withdraw from representation of me, with the

If I have secured debts that I wish to retain (mortgages, financed vehicles or other financed property) that I may be required to sign a reaffirmation agreement with the creditor in order to keep the property, and I must remain current on my payments. Many mortgage and car companies refuse to reaffirm the debt but we have found that if you keep up your payments you keep the property anyway.

Debts not discharged if they not paid in full: student loans; educational debts & tuition; most tax debts: unfiled, trust fund or late filed tax; undisclosed debts; support/maintenance debts; fines, debts incurred by fraud, or after the case is filed, future condo/HOA dues,or debts listed in your red or green folder as usually not discharged, or found non-dischargeable by a Judge.

Representation limited to Bankruptcy Court We don't represent you in state court, or loan modifications or similar matters.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition.

I understand that if I fail to take my financial management class after filing but before discharge, my case may be closed without a discharge, and I will be required to pay fees and costs to have it reopened. I have received the 11U.S.C § 527(a) disclosures.

na Baltazar(Debtor) (Joint Debtor) Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 150511

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Angelina Baltazar / Debtor | Bankruptcy Docket #: |
|----------------------------|----------------------|
|                            | Judge:               |

### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 08/10/2016 /s/ Angelina Baltazar

Angelina Baltazar

X Date & Sign

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<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Desc Main

B 201A (Form 201A) (11/11)

## UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Angelina Baltazar / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### **Chapter 11:** Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 08/10/2016 | /s/ Angelina Baltazar                |   |
|-------------------|--------------------------------------|---|
|                   | Angelina Baltazar                    | _ |
| Dated: 08/11/2016 | /s/ Christine Michelle Kuhlman       |   |
|                   | Attorney: Christine Michelle Kuhlman | _ |

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|   | •  | : Baltazar   | Case Number (if know   | wn)   |
|---|--|--|--|---|
|   | Angelina   | Middle Name Last Name  |  |   |
|   | First Name   |  |  |   |
| ırt 6:  | Answer These Questions   | for Reporting Purposes   |  | 11 44 H C C S 404(8)  |
| Wha   | t kind of debts do<br>have?  | as "incurred by an individual i  | consumer debts? Consumer debts are define<br>primarily for a personal, family, or household pur  | id in 11 U.S.C. § 101(e)<br>pose."                          |
| you   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  | No. Go to line 16b.<br>Yes. Go to line 17.   | •  | in a phtain   |
|   |  | 16b. Are your debts primarily money for a business or inve                                   | business debts? Business debts are debts the street or through the operation of the business   | at you incurred to obtain<br>or investment.                 |
|   |  | No. Go to line 16c. Yes. Go to line 17.  |  |   |
|   |  | 16c. State the type of debts you o   | owe that are not consumer debts or business det  | ots.  |
|   |  |  |  |   |
|   | you filing under<br>apter 7?   | No. I am not filing under C  |  | pperty is excluded and                                      |
| Do  | you estimate that after  | Yes. I am filing under Chap<br>administrative expens   | oter 7. Do you estimate that after any exempt pro-<br>ses are paid that funds will be available to distribu                                    | te to unsecured creditors?                                  |
| ex  | y exempt property is<br>cluded and   | No.  |  |   |
| ar  | ministrative expenses<br>e paid that funds will be<br>allable for distribution | Yes.   |  |   |
| to  | unsecured creditors?   |  | <b>□</b> 1,000-5,000   | 25,001-50,000   |
| s. H  | ow many creditors do   | <b>■</b> 1-49<br><b>□</b> 50-99  | ☐ 5,001-10,000   | ☐ 50,001-100,000  |
| -   | ou estimate that you<br>we?  | 100-199<br>200-999   | ☐ 10,001-25,000  | ☐ More than 100,000   |
|   |  | \$0-\$50,000   | ☐ \$1,000,001-\$10 million   | □\$500,000,001-\$1 billion<br>□\$1,000,000,001-\$10 billion |
| 19. H   | ow much do you<br>stimate your assets to                                       | \$50,001-\$100,000   | \$10,000,001-\$50 million  | ☐\$10,000,000,001-\$50 billion                              |
|   | e worth?   | \$100,001-\$500,000  | ☐ \$50,000,001-\$100 million<br>☐ \$100,000,001-\$500 million  | ☐ More than \$50 billion                                    |
|   |  | \$500,001-\$1 million  | □\$1,000,001-\$10 million  | □\$500,000,001-\$1 billion                                  |
| 20. F   | low much do you  | \$0-\$50,000   | ☐ \$10,000,001-\$50 million  | \$1,000,000,001-\$10 billion                                |
| €   | estimate your liabilities  | \$50,001-\$100,000   | \$50,000,001-\$100 million   | \$10,000,000,001-\$50 billion                               |
| t   | o be?  | ☐ \$100,001-\$500,000<br>☐ \$500,001-\$1 million   | ☐ \$100,000,001-\$500 million  | ☐ More than \$50 billion                                    |
| Part  | 7: Sign Below  |  |  |   |
|   |  |  | and I declare under penalty of perjury that the inf  |   |
| Fory  | ou   | if I have chosen to file under C<br>of title 11, United States Code                          | Chapter 7, I am aware that I may proceed, if eligi<br>b. I understand the relief available under each ch                                       |   |
|   |  | If no attorney represents me a   | and I did not pay or agree to pay someone who is did not pay or agree to pay someone who is did not call the notice required by 11 U.S.C. § 34 |   |
|   |  | Leaguest relief in accordance  | with the chapter of title 11, United States Code,  | specified in this petition.                                 |
|   |  | I understand making a false s<br>with a bankruptcy case can n<br>18 U.S.C. §§ 152, 1341, 151 | statement, concealing property, or obtaining monesult in fines up to \$250,000, or imprisonment for 9, and 3571.                               | r up to 20 years, or both.                                  |
| anterior property in the control of |  | * Mylen  | a Caller x   | gnature of Debtor 2   |
|   |  | Executed on : S  | 12010  | MM / DD / YYYY  |
| 1   |  | MM .   | / DD / YYYY  |   |

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| **                                 |
|------------------------------------|
| Check if this is an amended filing |
|                                    |

## Official Form 106 Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

if two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a large statement of support of the bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 obtaining money or property by

| No  |                                   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and |
|---|-----------------------------------|--|
| Yes. Name of Person                         |                                   | Signature (Official Form 119).                                 |
|   |                                   |  |
| •   |                                   |  |
| lor nonalty of neriury. I declare that I ha | ve read the summary and schedules | filed with this declaration and that they are true and         |
| rect.                                       |                                   |  |
| bacolina ( sal                              | the x                             | · · · · ·  |
| Signature of Debtor 1                       | Signature of                      | Debtor 2   |

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| Debtor 1 | Angelina . |   | Baltazar  | Case Number (If known) |
|----------|------------|---|-----------|------------------------|
|          |            | Middle Name                             | Lest Name |                        |
|          | First Name | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |           |                        |
|          |            | **************************************  |           |                        |

| Part 12: Sign Below  |
|--|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of penjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  8 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date  MM / DD / YYYY  Date  MM / DD / YYYY |
| Did you attach additional pages to Your Statement of Financial Affairs for individuals Filing for Bankruptcy (Official Form 107)?  |
| No ·   |
| □Yes   |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  |
| No   |

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| The state of the s | property lease if the trustee does not assume it. 11 U.S.C. § 38 | Will the lease be assumed? |
|--|--|----------------------------|
| Describe your unexpired personal property.   |  | □ No                       |
| SSOI'S Hame.   |  | ☐ Yes                      |
| escription of leased<br>operty:  |  |                            |
| essor's name:  | ·  | □ No                       |
| escription of leased roperty:  | ·  | ☐ Yes                      |
| essor's name:  |  | ☐ No<br>☐ Yes              |
| escription of leased roperty:  |  |                            |
| essor's name:  |  | No<br>                     |
| Description of leased property:  |  |                            |
| essor's name:  |  | □No<br>□Yes                |
| Description of leased property:  |  |                            |
| essor's name:  |  | No<br>                     |
| Description of leased property:  |  | □ 165                      |
| .essor's name:   |  | ☐ No ☐ Yes                 |
| Description of leased property:  |  |                            |
| art 3: Sign Below  |  |                            |
|  | dicated my Intention about any property of my estate that sec    | cures a debt and any       |

Official Form 108

Record # 708074

Statement of Intention for Individuals Filing Under Chapter 7

Page 2 of 2

### DISCLAIMER Debtors have read and agree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outwelghs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filling of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filling or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, witful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of traud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are vold. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.

18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURFOUR PETITION IS APPURATE INV

Dated: 3 / 10 /2016

Angelina Baltaz**á**r

X Date & Sign

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## **UNITED STATES BANKRUPTCY COURT** NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Angelina Baltazar / Debtor

Bankruptcy Docket #:

Judge:

## VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Dated: 8 / 10 /2016

X Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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| Debtor 1                     | Angelina   |   | Baltazar  | Case !             | Number (if known) _ |   | <del></del>  |
|------------------------------|--|---|---|--------------------|---------------------|---|--|
| JODIUI 1                     | First Name   | Middle Name   | Last Name   |                    |                     |   | 1  |
|                              |  |   |   | Colum<br>Debto     |                     | Column B Debtor 2 or non-filling spouse |  |
|                              |  |   |   | 200000000          | £0.00               | ŧn nn                                   |  |
| 8. Une                       | mployment compens                                  | ation   |   |                    | \$0.00              | \$0.00                                  | and the second s |
| Do i<br>und                  | not enter the amount it<br>er the Social Security  | f you contend that the amount rec<br>Act. Instead, list it here:  | eived was a benefit                                     |                    |                     |   |  |
| For                          | you  | ***************************************   |   |                    |                     |   | Action (Action)  |
|                              |  |   |   |                    |                     |   |  |
| 9. Pe<br>be                  | nsion or retirement in<br>nefit under the Social ( | ncome. Do not include any amoun<br>Security Act.  | t received that was a                                   |                    | \$0.00              | \$0.00                                  |  |
| Do                           | not include any benef                              | ources not listed above. Specify this received under the Social Secie, a crime against humanity, or intest other sources on a separate pa | inty Act or payments received<br>ernational or domestic | •                  |                     | <b>.</b> 0.00                           | on the same of the |
| . 10:                        | a  |   |   |                    | \$0.00              | \$ 0.00                                 | viscomer.  |
| 10                           |  |   |   | <u>\$</u>          | 0.00                | \$0.00                                  |  |
| •                            |  | separate pages, if any.   |   |                    | \$0.00              | \$0.00                                  | and the same of th |
| 44 6                         | doulate vour total CUI                             | rrent monthly income. Add lines 2<br>stal for Column A to the total for Co  | through 10 for each                                     |                    | \$1,183.67 +        | \$0.00                                  | = \$1,183.67   |
|                              |  |   |   |                    |                     | ,                                       |  |
| Part                         |  | nether the Means Test Applies to Y  | ······································                  |                    |                     |   |  |
| 12. C                        | alculate your current                              | monthly income for the year. Fol<br>urrent monthly income from line 11  | low these steps:  | Cor                | w line 11 here      | 12a, l                                  | \$1,183.67   |
| 12                           |  |   | ***************************************                 |                    | y mic it note       | ***                                     | x 12   |
| epeliyanina.                 |  | e number of months in a year).  | * * *   |                    |                     | 12b,                                    | \$14,204.04  |
| 12                           | <ul> <li>The result is your</li> </ul>             | annual income for this part of the  | form.   |                    | ·                   | 120.                                    | \$14,204.04  |
| 13. C                        | alculate the median f                              | amily income that applies to you  | . Follow these steps:                                   |                    |                     |   | -  |
| Fi                           | II in the state in which                           | you live.   | i IL  |                    |                     |   |  |
| F                            | II in the number of pec                            | ople in your household.   | 1   |                    |                     |   | A. A   |
| 1                            |  | •   | havracheld  | •                  | <i>:.</i>           | 13.                                     | \$49,741.00  |
| 1 -                          | طممناه حم عملا مراد علي                            | rincome for your state and size of<br>ole median income amounts, go or<br>n. This list may also be available a                            | iline using the link specified in th                    | e separate         |                     | •                                       |  |
| 14 H                         | low do the lines comp                              | pare?   |   |                    |                     |   |  |
|                              | ia. X ine 12b is less                              | s than or equal to line 13. On the t  | op of page 1, check box 1, Ther                         | e is no presumptio | on of abuse.        |   |  |
| 14                           | tb. Line 12b is mo                                 | re than line 13. On the top of page<br>nd fill out Form 122A-2.   | e 1, check box 2, The presumption                       | on of abuse is det | ermined by Form     | 122A-2.                                 |  |
| Pa                           | 1.3: Sign Below                                    |   |   |                    |                     |   |  |
|                              | By signing here,                                   | I declare under penalty of perjury  | that the information on this state                      | ement and in any a | attachments is true | e and correct.                          | •  |
|                              | frage  | Angelina Baltazar   |   |                    |                     |   |  |
| Madagin Professor Assessment | Data: 9  | (0 /2016  |   | <b>.</b>           |                     |   |  |
|                              | * Date::(  | <del></del>   | 400A C  |                    |                     |   |  |
| -                            |  | ne 14a, do NOT fill out or file Fort  |   |                    |                     |   |  |
|                              | If you checked li                                  | ine 14b, fill out Form 122A-2 and f   | ile it with this form.                                  |                    |                     |   |  |

. 7

Form B 201A, Notice to Consumer Debtor(s)

In re Angelina Baltazar / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: \ / \ \O\_/2016

Angelina Baltazar

X Date & Sign

Dated: 8 / 10 /2016

Attorney: Christine Michelle Kuhlman

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